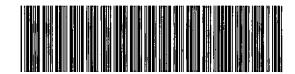
## P16000035757

· (Re	equestor's Name)			
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: JC TURB ENGIN	ES LLC	·		
DOCUMENT NUM	BER: P16000035757		<del></del>		
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	JUAN M CABALLERO				
		Name of Contact Person	n		
	J C TURB ENGINES LLC				
		Firm/ Company			
	15356 SW 42ND LN				
		Address			
	MIAMI, FL 33185				
		City/ State and Zip Cod	e		
JUA	NTIGRENUEL@HOTMAIL.	СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
	•				
For further information	n concerning this matter, pleas	se call:	•		
JUAN M CABALLERO		786	970-1179		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		· · · · · · · · · · · · · · · · · · ·	Address Iment Section		
Division of Corporations		Division of Corporations			
P.O. Box 6327		Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314			assee, FL 32301		

## Articles of Amendment to Articles of Incorporation of



J C TURB ENGINES LLC

(Name of Corporation	as currently filed with the Florida Dept. of State)
P16000035757	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
J C TURB ENGINES CORP	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	<u>ESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	l office address in Florida, enter the name of the fice address:
Name of New Registered Agent	
	(Florida street address)
N. 5 100	
New Registered Office Address:	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: am familiar with and accept the obligations of the position.
Viguate	una of You Bagistavad Agant, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
fype of Action (Check One)	<u>Title</u>	<u>Name</u>			Address	
1) X Change	PT	JUAN M	CABALLERO		15356 SW 42 LANE	
Add					MIAMI, FL 33185	
Remove					<u> </u>	
2) Change				_		
Add						
Remove						
3 ) Change		_			<u> </u>	
Add						
Remove						
4)Change			·····			
Add						
Remove						
5) Change				<del></del>		
Add						
Remove						
6) Change						
// Change		<del>-</del>		<del></del>		
Add Remove						

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
If an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u> </u>	

The date of each amendment(s) as date this document was signed.	loption:	, if other than the
•	0/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
(By a di	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
appoin	ed fiduciary by that fiduciary)	
	JUAN M CABALLERO	
-	(Typed or printed name of person signing)	<del></del>
	PRES	
	(Title of person signing)	