P99000085498

. (Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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-07/02/12--01024--018 **35.00

September 6 MILES

Amend 12

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation
POCUMENT NUMBER: P99000085498

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LILIAN LAGARDERA

Name of Contact Person

JL KAYA, INC

Firm/Company

6701 NW 7th ST, SUITE # 190

Address

MIAMI, FL 33126

City/State and Zip Code

jlkaya@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lilian Lagardera
Name of Contact Person

at (305) 888-3962
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2012

LILIAN LAGARDERA JL KAYA, INC. 6701 NW 7TH ST - STE. 190 MIAMI, FL. 33126

SUBJECT: JL KAYA, INC. Ref. Number: P99000085498

We have received your document for JL KAYA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You failed to list the current and new registered agent information along with the new registered acceptance and signature.

It appears you wish to change the corporate address. If so submit the enclosed Amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 312A00018908



July 5, 2012

LILIAN LAGARDERA JL KAYA, INC. 6701 NW 7TH ST - STE. 190 MIAMI, FL 33126

SUBJECT: JL KAYA, INC. Ref. Number: P99000085498

We have received your document for JL KAYA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

You failed to list the new registerd agent.

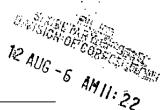
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 212A00018073

Articles of Amendment to Articles of Incorporation of



JL KAYA, INC.	"′//: ɔ̃.
(Name of Corporation as currently filed with th	te Florida Dept. of State)
P990008549	8
(Document Number of Corporatio	n (11 known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	<u>.</u>
	The new
name must be distinguishable and contain the word "corpore" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	6701 NW 7th Street, Suite # 190
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami, FL 33126
	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 261436
	Miami, Fl 33126
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addresses	nddress in Florida, enter the name of the ress:
Name of New Registered Agent n,	/a
(Florida	a street address)
New Registered Office Address:	, Florida
	ny) (Zip Coae)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	tent: iar with and accept the obligations of the position.
Signature of New Register	red Agent, 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:

P = 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.

Example: X Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Nam	<u>e</u>		<u>Addres</u> s
1) Change			n/a		
Add					
Remove					
2) Change					
Add			·		
Remove			ч. •	٠.	
3) Change					
Add					
Remove					
4) Change				<u></u>	
Add Remove					
Kemove					
5) Change				<u>.</u>	
Add			,		
Remove					
6) Change			1.		
Add					
Remove					

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
-, ,,	
	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	•
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	8/2/12			
Effective date if applicable:				
Enective date <u>ir applicable</u> .	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were ado by the shareholders was/were sui	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.			
☐ The amendment(s) was/were app must be separately provided for	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			
8/2/2 Dated	0 ± 2			
Signature(By a di	irector, president or other officer – if directors or officers have not been			
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)			
	LILIAN LAGARDERA			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			