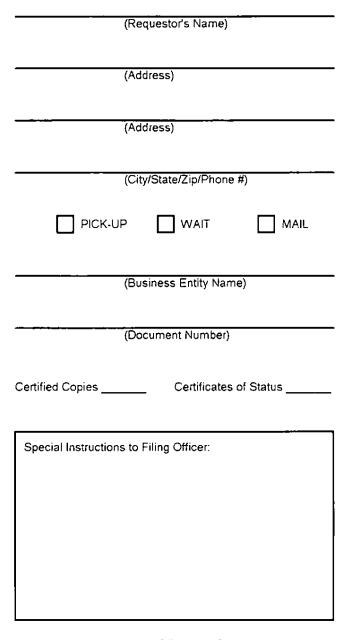
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## **COVER LETTER**

Division of Corp	oorations		
	STILIANOU JR LLC		
SUBJECT:	Name of Limit	ted Liability Company	<del></del>
The enclosed Articles of A	AMES M STILIANOU JR LLC  Name of Limited Liability Company  Articles of Amendment and fee(s) are submitted for filing.  Il correspondence concerning this matter to the following:  FRANCESCA TENEBRUSO-BALL  Name of Person  FTB BUSINESS SOLUTIONS  Firm/Company  3717 BOWDEN CIR E  Address  JACKSONVILLE. FL 32216  City/State and Zip Code  904-737-4975  E-mail address: (to be used for future annual report notification)  permation concerning this matter, please call:  ATENEBRUSO-BALL  Name of Person  Area Code  737-4975  Daytime Telephone Number  heck for the following amount:  ing Fee  \$555.00 Filing Fee \$ Certificate of Status Certified Copy  Certificate of Status &		
Please return all correspor	ndence concerning this matter t	o the following:	
	FRANCESCA TENEBRUS	SO-BALL	
		Name of Person	
	FTB BUSINESS SOLUTION	ONS	
		Firm/Company	
	3717 BOWDEN CIR E		
		Address	
	JACKSONVILLE, FL 322	16	
		City/State and Zip Code	-
			<del></del>
	E-mail address: (t	o be used for future annual report notific	eation)
For further information co	oncerning this matter, please ca	H:	
FRANCESCA TENEBRUSO-BALL		904 737-4975 at ()	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee			

MAILING ADDRESS:

TO:

**Registration Section** 

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

### STREET/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAMES M STILIANOU JR LLC		
( <u>Name of the Limited Liah</u> (A Flor	oility Company as it now appears on our records. ida Limited Liability Company)	,
The Articles of Organization for this Limited Liability		and assigned
Plorida document number L21000146532		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	DRESS)	
		~ )
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
		••
B. If amending the registered agent and/or requestered agent and/or the new registered office are		enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Floi	rida
	City	Zip Code

### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	STEVEN M. STILIANOU	5143 CHICORY CIRCLE	Add
		MIDDLEBURG, FL 32068	Remove
			Change
			Add
			☐ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			☐ Remove
			☐ Change
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ective date, if other than the neffective date is listed, the date muster. If the date inserted in this blument's effective date on the D	t be specific and cannot be prior ock does not meet the applic.	able statutory filing requi		
record specifies a delayed The 90th day after the rec		t an effective time,	at 12:01 a.m. on the ear	lier of:
MAY 22	2024			
		·		
MM	) _ ( _ / _ /			

Page 3 of 3

Filing Fee: \$25.00