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DEC 28 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JCAM MODELING AGENCY L.L.C
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARLYN MERCADO
Name of Person

JCAM MODELING AGENCY L.L.C
Firm/Company

6900 SOUTH ORANGE BLOSSOM TRAIL #432
Address

ORLANDO/FL/32809
City/State and Zip Code

MARILYNMTHUSA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARLYN MERCADO at (321) 7465323
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ICAM MODELING AGENCY L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER, 29, 2022 and assigned Florida document number L22000421859.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6900 SOUTH ORANGE BLOSSOM TRAIL

(Principal office address MUST BE A STREET ADDRESS)

SUITE 432

ORLANDO FL 32809

Enter new mailing address, if applicable:

5981 Winegrad Rd. #A

(Mailing address MAY BE A POST OFFICE BOX)

Orlando Fl

32809

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MARLYN MERCADO

New Registered Office Address:

6900 SOUTH ORANGE BLOSOSM TRAIL #432

Enter Florida street address

ORLANDO

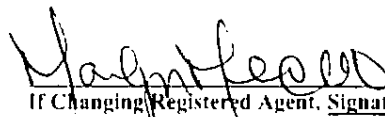
City

Florida FL 32809

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>	<u>Type of Action</u>
AMBR	MARLYN MERCADO	6900 SOUTH ORAGNE BLOSSOM TRAIL #432, OR	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARLYN MERCADO	6900 SOUTH ORANGE BLOSSOM TRAIL #432, OR	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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