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Office Use Only



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2019 HAY 13 PM 4: 42

C. GOLDEN MAY 2 4 2019

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Jerney Holdings LLC 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:	
Jennifer Smith Name of Person	
Jennifer R. Snith, P.A.	
301 Yamato Road, Suite #2195	
Boca Raton Ft 33431 City/State and Zip Code	
Jen o South V. Ja - CPa. CDm T-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jenn Her Smith at (561) 997-6797 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

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

FILED

Jern	eg Holdings	1_LC	2019 MAY 13 PH 4: 42
(<u>Name of the Limited</u> (A	Liability Company as it now ap Florida Limited Liability Compa	nears on our records.)	
The Articles of Organization for this Limited Liab	bility Company were filed on	1/2/18	and assigned
riorida document number	<u></u>		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability compan	v here:	
		-	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," t	he designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:		
(Principal office address MUST BE A STREET			
· · · · · · · · · · · · · · · · · · ·			
		•	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	OX)		·-·
			
	-,		
B. If amending the registered agent and/or		on our records, g	enter the name of the new
registered agent and/or the new registered office	<u>ce address here</u> :		
Name of New Registered Agent:			 _
New Registered Office Address:		_	
	Enter	Florida strevt address	
		Floric	da
	Ciṃ		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 = Ms $AMBR = At$	enager othorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Pensoo Trust Company FBO Fereniah McGinty	5919 NW 122 nd Drive	🖸 Add
		Coral Springs fr 330	
			Change
			🗆 Add
			□ Remove
			🗆 Change
			Add
			🗆 Remove
			Change
			Change
			
			Remove
			Change
			□ Add
			D Remove

_□ Change

D. 31 ang	eading any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
Note:	tive date, if other than the date of filing: 5/1/2019 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.	(3)(he
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.	
Dated	<u>5/1</u> . 2019.	
	Signature of a member or authorized representative of a member	
	Jeremiah McGinty Typed or printed name of signee	

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Filing Fee: \$25.00