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COVER LETTER

TO: Registration S Division of C	Section orporations			
	ce & Easy LLC			
SUBJECT:	Name of Lim	nited Liability Company		
	of Amendment and fee(s) are sub condence concerning this matter	_		
	Gerald A. Huys			
		Name of Person		
	Jerrys Nice & Easy LLC			
		Firm/Company		
	5466 Hofner Avenue			
		Address		
	Orlando, Fla 32812			3 24
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	SEP 21
	E-mail address: ((to be used for future annual report notifi	cation)	<u> 2</u>
For further information	concerning this matter, please c	eall:		MII: 18
Jane Davis		407 489 8415 at ()		-
Name	of Person		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 Sta Certified Copy (additional copy is e	atus &

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

Jerrys Nice & Easy		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our record rida Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liabilit Florida document number L11000071918	y Company were filed on 06/20/2011	and assigned
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the	imited liability company here:	
na		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	na	<u> </u>
Principal office address MUST BE A STREET AD	DRESS)	SE 25
		<u> </u>
		المراجعة الم
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		a de la company
		<u> </u>
B. If amending the registered agent and/or re registered agent and/or the new registered office a		ls, <u>enter the name of the new</u>
Name of New Registered Agent: na		
New Registered Office Address:	Enter Florida street addre	100
	Enter rioriaa street daare	<i>აა</i>
		lorida
	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>	Address	Type of Action
AMBR	Tonya M McDauley	5466 Hoffner Avenue	■ Add
			Remove
			□ Add
			□ Remove
			Change
	· 		
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n effecti te: If t	ate, if other than the date of filing:	Pursuant to 605.020' vill not be listed as
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. of h day after the record is filed.	on the earlier o
ted <u>(</u>	1/16/ A 7/16.	
	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00