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CORPORAT	Έ
ACCESS	- 4

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

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WALK IN

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(JAYNO & WD INV CORPORATE NAME AND I	DOCUMENT #)
	CORPORATE NAME AND L	
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COVER LETTER

TO: Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

CUBICAT.	JAYNO & V	WD INVESTMENT LLC			
SUBJECT:		Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub- ndence concerning this matter	•		
		Deshommes, Waldings			
		-	Name of Person		
		JAYNO & WD INVESTM	IENT LLC		
			Firm/Company		
		10761 NW 5 AVENUE			
			Address		
		Miami, FL 33168			
			City/State and Zip Cod	ot.	
		WAI.DINGS03@GMAIL.C	COM		
		E-mail address: (to be used for future annu	ial report notificat	tion)
For further in	nformation co	oncerning this matter, please co	all:		
Deshommes	, Waldings		786 (at () _	608-4034	
	Name of	Person	Area Code	Daytime Te	dephone Number
Enclosed is a	check for th	e following amount:			
□ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Fe Certified Copy (additional copy is		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	iling Address gistration S vision of Co		Regis	Address: stration Section of Corpor	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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

FILED 2022 AUG 19 AM 11: 50

JAYNO & WD INVESTMENT LLC

(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 v	were filed on 11/08/2011 and assigned
Florida document number L11000127106	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

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
MGRM	JAMES COLAS	490 NW 108TH STREET	□Add
		MIAMI FL 33168	■Remove
MGR	WALDINGS DESHOMMES	11501 NE 13 AVENUE	BAdd
		MIAMI FL 33161	□Remove
			□Change
			□Add
			□Remove
			□ Change
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