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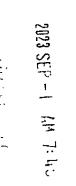
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то:	Registration So Division of Cor			
CHD III	C'II	TERRAZA CLEANING SERV	/ICE LLC	
SUBJEC	LI:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		JHON RODRIGUEZ		
		-	Name of Person	
		JIREH MULTISERVICES	ELLC	
		·	Firm/Company	
		2978 S JOG RD, SUITE A		
			Address	
		GREENACRES FL		
			City/State and Zip Code	
		jirehmulti@gmail.com		
		E-mail address: (to be used for future annual report notificat	tion)
For furth	her information of	concerning this matter, please co	all:	
JHON F	RODRIGUEZ		561 574 9110	
	Name (of Person	at () Area Code Daytime To	elephone Number
Enclosed	d is a check for t	he 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 Division of C	Section Corporations	Street Address: Registration Section Division of Corporation	rations
	P.O. Box 632 Tallahassee.		The Centre of Tall 2415 N. Monroe S	

Tallahassee, FL 32303

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

JACINTO TERRAZA CLEANING SERVICE LLC

2023 SEP - 1 AM 7: 45

(Name of the Limited Liability Co (A Florida Linu	mpany as it now appears on our records.) ted Liability Company) (A: [AHA	
The Articles of Organization for this Limited Liability Comp		
Florida document number L12000044947	any were med on	and assigned
Florida document number (1720/00/1777)		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
JJT CLEANING SERVICES LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:	·-	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi	ice address on our records, enter the	name of the new regis
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a)

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
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			□Remove
		·	□Change
			□Add
			Remove
			□Change
			□ Add
		 	□Remove
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If the reco record is f	rd specifies a delayed eff îled.	ective date, but r	not an effective	time, at 12:01 a.m.	on the earlier of: (1) The 90th day after ti
	08/30		2023			