L120000047 154

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COVER LETTER

TO:	Registration S Division of Co						
CHID III	JTL Asset	Management LLC					
SCHAIN	(_1;	Same of Limited Liability Company					
The enc	lesed Articles of	Amendment and feers) are sub	mitted for filing.				
inggs, n	cturn all correspo	ondence concerning this matter	to the following:				
		Ve Ju					
			Name of Person				
		JTI, Asset Management I	I C				
			Firm/Company				
(40) Town Płaza Ct, #2020							
			Address				
		Winter Springs, FL 32708					
			City/State and Zip Code				
		teresa.jin@jtlasset.com					
		l -mail address: i	to be used for fitting annual report notifi	ication)			
For Jurti	er information (concerning this matter, please c	all:				
Ye Jin			813 6008324				
Name of Person			at () Area Code Daytime	Telephone Number			
Enelosei	His a elieek for t	be following amount:					
₩ S23.	uo Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Fiting Fee. Certificate of Status & Certified Copy radditional cept 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

JTL Asset Management 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 were filed on 04/05/2012 Florida document number | L12000047154 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 "LLC" 1401 Town Plaza Ct. #2020 Enter new principal offices address, if applicable: Winter Springs, FL 32708 (Principal office address MUST BE A STREET ADDRESS) 1401 Town Plaza Ct. #2020 Enter new mailing address, if applicable: Winter Springs, FL 32708 (Muiling address MAY BE A POST OFFICE BOX) 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: Ye Jin

1401 Town Plaza Ct. #2020

Enter Florida street address

Winter Springs Florida 32708

Zip Code Name of New Registered Agent: New Registered Office Address:

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:

MCK =	Manager
AMBR =	Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
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			☐ Remove
			Change
			
			☐ Remove
			Change

	
ffective date, if other than the an effective date is fisted, the date me ote: If the date inserted in this becament's effective date on the E	toptional) hust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.6 block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
record specifies a delaye The 90th day after the rec	ed effective date, but not an effective time, at 12:01 a.m. on the earlier ecord is filed.
07/32 ded	2019
sted (47°32	
sted (17732	Signature of a member of authorized representative of a member

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