<u>L1200062926</u>

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SECRELARY OF STAKE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ROWE JENK INVESTMENTS, 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:				
ROOMI KUNURIA Name of Person				
Name of Person				
NCORPORATE USA, LLC				
NCORPORATE USA, LIC 40 E. MAINST. LODALLEXANDER, #756				
Address				
NEWARKIDE, 19711				
City/State and Zip Code				
info a usa-incorporate Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ROOMI KUNURIA a1 (609) 454-5480				
Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)				
(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

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ROWE JENK INVEST	MENTS CHERTARY OF COLOR
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our recurds ASSEE, FLORIDA
The Articles of Organization for this Limited Liability Company were Florida document number	
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 end with the words "Limited L"L.L.C."	iability Company," the designation "LLC" or the abbreviation
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 registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Error a rorrad brider dadress

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title <u>Name</u> **Address Type of Action** WENDY JENKINS 17 NARVIKAVE Add Remove ☐ Add ☐ Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JULY 19 Room Signature of a member or authorized representative of a member ROOM! EUNURIA—
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00