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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067 Phone : (407)370-3686 Fax Number : (407)370-3120

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 2JC INVESTMENTS LLC

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08/13/2021 07:36 AM TO:18506176383 FROM:4073703120 Page: **COVER LETTER** TO: Registration Section **Division of Corporations** 2JC INVESTMENTS LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fce(s) are submitted for filing. Please return all correspondence concerning this matter to the following: CAROLINE LARSON Name of Person LARSON ACCOUTING & CONSULTING SERVICE LLC Firm/Company 7901 KINGSPOINTE PARKWAY STE 17 Address ORLANDO, FL 32819 City/State and Zip Code TAXPREPARER@LARSONACC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 407 370-3686 JOSE HENRIQUE DA SILVA Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee, ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & **\$25.00** Filing Fee

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status &

Certified Copy (additional copy is enclosed)

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2JC INVESTMENTS LLC			
(Name of the Lin	ited Liability Con (A Florida Limite	npany as it <u>now appears on our r</u> ed Liability Company)	ecords.)
The Articles of Organization for this Limited		ny were filed on 07/13/2012	and assigned
Florida document number L12000091372			
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited li	ability company here:	
JA2G INVESTMENTS LLC			
The new name must be distinguishable and contain the	words "Limited Lia	ibility Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable:		N/A	2021 A
(Mailing address MAY BE A POST OFFICE	EBOX)		
			SSE 3 E
B. If amending the registered agent and/or agent and/or the new registered office addr	registered offic e <u>ss here</u> :	e address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida street a	ddress
			_, Florida
		Cin	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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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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Jose Henr		Da S	ilva		P
Signature of a member or a	uthorized repre	esentative of a m	nember	25	PM 12: 45
JOSE HENRIQUE DA SILVA				202	_

Filing Fee: \$25.00