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OCT 2 2 2019

T. PALAPTON

COVER LETTER

TO: Registration Section
Division of Corporations

Just For You Entertainments, 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:

Just For You Entertainments, LLC

Firm/Company

3212 Huntwicke Blvd.

Address

Davenport, Fl. 33837

Javenport, 11. 33037

City/State and Zip Code

just4ufotobooths@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edmanuel Lebron

{...}407\962-5673

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 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

Just For You Entertaiments, Ll			
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)		
	ty Company were filed on October 01, 2013 and assigned and assigned		
This amendment is submitted to amend the following			
A. If amending name, enter the new name of the	limited liability company here:		
Just For You Entertainments, LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:	egistered office address on our records, enter the name of the new address here:		
New Projects of Office Address			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City 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 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.

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

If amending any other information, en	ter change(s) h	ere: (Attach additional sheets, if necessary.)
,		
		
october 16	2013	
Laborat Library	; ———	Digitally signed by Edmanuel Lebron Date: 2013.10.16 20:11:17 -04'00'
Signature of	a member or aut	horized representative of a member
Edmanuel Lebron		
	Typed or prin	ted name of signee

Page 3 of 3

Filing Fee: \$25.00

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