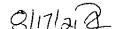
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COVER LETTER

TO: Registration So Division of Cor			,		
CHIMIS IN		•			
SUBJECT:	Name of Limi	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	EDWIN ETHAN RÖSARI	0			
		Name of Person			
	SPARTAN ANGELS ENT	ERPRISE LLC			
		Name of Limited Liability Company Int and fee(s) are submitted for filing. Interning this matter to the following: Name of Person TAN ANGELS ENTERPRISE LLC Firm/Company KEY LARGO DRIVE Address SONVILLE FL 32218 City/State and Zip Code SINJAN@GMAIL.COM E-mail address: (to be used for future annual report notification) this matter, please call: at (
	SPARTAN ANGELS ENTERPRISE LLC Firm/Company 4511 KEY LARGO DRIVE Address JACKSONVILLE FL 32218				
		Address			
	JACKSONVILLE FL 322	18			
		City/State and Zip Code			
	CHIMISINJAX@GMAIL.C		fication)		
For further information of	concerning this matter, please co				
INDHIRA ROSARIO					
Name o	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		
Mailing Addre Registration	Section	<u>Street Address:</u> Registration Se Division of Co			
Division of C	orporations		Pattations		

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHIMIS IN JAA LLC	The second of th	
(Name of the Limited Liability Company : (A Florida Limited Liab	ility Company)	
the Articles of Organization for this Limited Liability Company we lorida document number 1.14000016431	re filed on JANUARY 30, 2014	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability	y company here:	
PARTAN ANGELS ENTERPRISE LLC		
he new name must be distinguishable and contain the words "Limited Liability	Company." the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
 If amending the registered agent and/or registered office add gent and/or the new registered office address here: 	iress on our records, <u>enter the nam</u>	e of the new regis
Name of New Registered Agent:	<u></u>	
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
	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 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 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
			□ Add
			□Remove
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			🗆 Add
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