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(((H22000207097 3)))



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To:

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC Account Number : I20200000121 Phone : (770)928-2700 : (888)772-8108 Fax Number

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

Email Address: LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JOURCY, LLC Certificate of Status 0 Ü Certified Copy 04 Page Count \$25,00 Estimated Charge

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From: Mike Nataru

H22000207097 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

JOURCY, LLC	
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) la Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number 1.14000043489	Company were filed on 03/17/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD)	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter the name of the names of the names</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	Circ ZioCode

New Registered Agent's Signature, if changing Registered Agent:

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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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2022-06-14 19:37:19 GMT H22000207097 3

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
MGRM	GOLAB, MIGUEL H	1413 SANTA CRUZ AVE	
		CORAL GABLES, FL 33134	■ Remove
			Change
MGRM	SCHAPERSTEIN, CLAUDIA D	1413 SANTA CRUZ AVE	
		CORAL GABLES, FL 33134	□ Remove
			☐ Change
MGR	FEGOLALC	1413 SANTA CRUZ AVE	_ Add
		CORAL GABLES, FL 33134	Remove
			Change
			☐ Remove
			☐ Change
	-		Add
			☐ Remove
			Change
			□ Add
			Remove
			Change

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D. Han	nendi	ing any	other information.	H22000207097 3 enter changers) here: Attenda management	Charle dimersion i

date, if other than the date of fil		(option to of filing or usine than be day, after fil or minory filing requirements, this d	ai)
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E. Effectiv Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ilt an erloco document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

MIGUEL H GOLAB "Typed or primed many of immer

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