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(5.175 at 6.12 pt 115 115 117)	
PICK-UP WAIT	MAIL
(Business Entity Name)	<u> </u>
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Certified Copies Certificates of St	atus
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Special Instructions to Filing Officer:	
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•		COVER LETTER	
TO: Registration Sec Division of Corp			
		J2J Sales, LLC	
SUBJECT:			
	Name	of Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) a	re submitted for filing.	
Please return all correspor	ndence concerning this n	natter to the following:	
		Joel Anderson	
		Name of Person	
	J2.	Sales & Service, LLC	
		Firm/Company	
		825 Court Street	
	-	Address	<u>. </u>
	(learwater, FL 33756	
		City/State and Zip Code	
		anager a J2JSales.com	
		dress: (to be used for future annual repo	ort notification)
For further information co	incerning this matter, pl	ease call:	
Joel And	derson	727 - 244 -	2544
Name of	Person	·	Daytime Telephone Number
Enclosed is a check for th	e following amount:	1.42	
₹ \$25.00 Filing Fee	□ \$30.00 Filing Fee a Certificate of Sta		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registration Division of C Clifton Build	Corporations ling ive Center Circle

ARTICLES OF AMENDMENT **ARTICLES OF ORGANIZATION OF**

	J2J Sales	s, LLC		
(Name of the Limited	Liability Compan Florida Limited Li	y as it now appears on our re iability Company)	cords.)	
The Articles of Organization for this Limited Liab	oility Company v	were filed on4/2 <u>2/</u> 2014_	and assigned	
Florida document number_1.14000067116	·			
This amendment is submitted to amend the follows:	wing:			
A. If amending name, enter the new name of t	he limited liabil	lity company here:		
) · · · · · · · · · · · · · · · · · · ·	J2J Sales & Se		J. 1	- -
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ty Company," the designation	LLC" or the abbreviation the L.C."	7
Enter new principal offices address, if applicab	ole:		© 2°	
(Principal office address MUST BE A STREET	ADDRESS)	no change	•	111
			<u>ب</u> :	_
Enter new mailing address, if applicable:	ov.			_
(Mailing address MAY BE A POST OFFICE BO	221	no change		_
				_
B. If amending the registered agent and/or re registered agent and/or the new registered offic	~		nter the name of the new	
Name of New Registered Agent:	_no change			
New Registered Office Address:				
		Enter Florida street a	eddress	_
			, Florida	
		City	Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as register.	and complete p	performance of my dutie	s, and I am familiar with and	

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

•	d from our records:			
MGR = :	Nianager Authorized Member			
Title	Name		Address	Type of Action
no change the	is section	<u> </u> 		Add
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	further, the company manager and authorized member have chosen to change the
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el	lescription of the company's performance to "any lawful activity".
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n effec	tive date, if other than the date of filing:
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reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies of the record is filed. 21 September, 2017
reco The 9	90th day after the record is filed.
reco The 9	21 September, 2017

Filing Fee: \$25.00