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3/11/20

COVER LETTER

Division of Corporations JP Tax Solutions & Training Center LLC SUBJECT: _____ 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: Jesse L. Potts, Sr. Name of Person Firm/Company 401 W. Atlantic Avenue, Suite o9 Address Delray Beach, FL 33444 City/State and Zip Code joycepotts@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 358-9242 Jesse L. Potts, Sr. Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☑ \$55.00 Filing Fee & ☐ \$30.00 Filing Fee & ☐ \$60.00 Filing Fee, ☐ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section

TO:

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

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	& Training Center LLC	
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our recordability Company)	rds.)
The Articles of Organization for this Limited Liability Company		
Florida document number L14000130826		·
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
JP Tax & Financial Services LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		63
B. If amending the registered agent and/or registered office account and/or the new registered office account and/or the new registered office accounts.	ldress on our records, <u>ente</u> i	r the name of the new register
agent and/or the new registered office address here:		
Name of New Project 14		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre.	SS
		lorida
Nay Pagistaned Agant's Simple 15	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as prebeing filed to merely reflect a change in the registered office a company has been notified in writing of this all.	erformance of my duties, a ovided for in Chapter 605	nd I am familiar with and

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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
			□Add
			Remove
			□ Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Add
			Remove
			□Add
			□ Remove
			□ Chance

. Il aine	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effi Note:	ve date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 lf the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	d 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 ed.
Dated .	6/27/20 6/27/20
	Signature of a member or authorized representative of a member
	Jecce Perry Sal

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Company as it now appears on climited Liability Company)	
(A Florida L	imited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on $\frac{08/20/20}{2}$	ol4 and assigned
Florida document number L14000130826	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
JP Tax & Financial Services LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	-
		•
B. If amending the registered agent and/or registered	office address on our recor	is enter the name of the new registers
agent and/or the new registered office address here:	office addition of our record	13, enter the hance of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet address
	Cia	, Florida
New Registered Agent's Signature, if changing Registered	City	Zip Code
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my c ent as provided for in Chap	duties, and I am familiar with and ter 605, F.S. Or, if this document is
		ignature of New Registered Agent

· 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
			□Change
			□Add
			□Remove
			Change
			□Remove
			☐ Chang e
			🗆 Add
			□Renюve
			□Add
			□Remove
			🗆 Add
			Change

n amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
	
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(If an effective Note: If the	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
ord is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	6/27/20
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00