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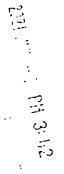
(Re	equestor's Name)
(Ac	ddress)
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(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations			
AG & JM L	LC	•		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	MARIA T MALDONADO	)		
		Name of Person	<del> </del>	
	AG & JM LLC			
		Firm/Company		
	5141 NW DUNN RD			
		Address		
	FT PIERCE FL 34981			
	<u> </u>	City/State and Zip Code		
	maria13851@yahoo.com	to be used for future annual report r	politication)	
For further information c	oncerning this matter, please c		(Mineauxii)	
MARIA T MALDONAI	_	347 9572092		
	f Person	at () Area Code Day	time Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address		
Registration Section Division of Corporations		Registration Division of C		
P.O. Box 632	**	The Centre o	The Centre of Tallahassee	
Tallahassee, l		2415 N. Mor	roe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AG & JM LLC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.14000167051}{1.14000167051}$ .	y were filed on 10/27/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<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 records, enter the nam	e of the new registere
agent and/or the new registered office address here:		
		200
Name of New Registered Agent:		
New Registered Office Address:		' . <del></del> !
	Enter Florida street address	,
	, Florida	70 22 <u>wi</u>
	City	Zip Cade
New Registered Agent's Signature, if changing Registered Agent:		. rs

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
MGR	MARIA T MALDONADO	5121 NW DUNN RD	
		FT PIERCE FL 34981	≅Remove
			□Change
~			
			□Remove
			□Change
			□Remove
			□Change
-			□Add
			□Remove
			Change
	<u></u>		□ Add
			□Remove
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			□Remove
			□Change

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ffectiv	re date, if other than the date of filing: (optional)	
an effe lote:   1	tive 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 605.02 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nt's effective date on the Department of State's records.	
record Lis file	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 d.	he
ated_	06-28 2021	
	Signature of a member or authorized representative of a member	

Typed or printed name of signee