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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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A. BUTLER

COVER LETTER

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TO: Registration Section

Division of Cor	porations	•	
SUBJECT:	JAGUEN REAL Name of Lim	Ty GRoup LLC ited Liability Company	<u>. </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JAYLYN	Name of Person	
		Firm/Company	
	3817 SW	20TH AVE	
		C, FC 339 14 City/State and Zip Code	_
	G-mar/address: (Lynn E Com e AS J. NE	fication)
For further information c	oncerning this matter, please c	all;	
Jaylynn	1 F. PEREZ	at (<u>908</u>) <u>943</u> Area Code Daytim	8650
, tune o	7. (1.01)	,	
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Solution of Control P.O. Box 632 Tallahassee,	Section Corporations 17	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassec e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1

	A	44 g 11 g
JAYDE	A REACTY GROUP LLC. A Florida Limited Liability Company)	1 1 1 1 20
(Name of the Limite	d Liability Company as it now appears on our records.)	
,	A Florida Limited Liaotity Company)	11/5
The Articles of Organization for this Limited Lia	ability Company were filed on <u>July</u> 6,20	and assigned
Florida document number <u>L / 5000 / /</u>	5516.	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREE	T ADDRESS)	
Cates and multiple address if analoubles		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE I	<u></u>	
		
	egistered office address on our records, <u>enter the na</u>	me of the new registered
agent and/or the new registered office addres	s nere.	
Name of New Registered Agent:	JAYLYNN F. POREZ	
New Registered Office Address:	3817 SWROTH AVE Enter Florida street address	
	JAYLYNN F. POREZ 3817 SWAUTH AVE Enter Florida street address CAPE CORAL Florida City	3 39 14 Zup 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 Clanging 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 Type of Action <u>Title</u> **Address** <u>Name</u> MGK GREGORIO PEREZ 3817 SW 20TH AVE DAD CAPE CORAL, FL 33714 XRemove MGR JAYLYNN F. PEREZ 3817 SW 20TH AVE XADD CAPE COASE FL 33918 | Remove ____ Change _____ Change _____ □Change

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<u>ote:</u> If the d	e, if other than the is listed, the date in this lective date on the lective date on the lective date.	block does not m	eet the applica	o date of filing or r ble statutory filin	2024 (onore than 90 days ag requirements	optional) after filing.) Pursu s, this date will n	ant to 605.020 ot be listed a:
ecord specif is filed.	ies a delayed effect	ive date, but not	an effective tin	ne, at 12:01 a.m.	on the earlier o	of: (b) The 90th	day after the
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ned <u>)</u> <u>é</u>		Signature of a n	- ()				

Filing Fee: \$25.00



BECENED

SECRETARY OF STATE

December 12, 2021

JAYLYNN F. PEREZ 3817 W 20TH AVE CAPE CORAL, FL 33914

SUBJECT: JAYDEN REALTY GROUP LLC

Ref. Number: L15000115516

We have received your document for JAYDEN REALTY GROUP LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU DO NOT CHECK A TYPE OF ACTION FOR ONE OFFICER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 821A00029896



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2021

JAYLYNN F PEREZ 3817 SW 20TH AVE CAPE CORAL, FL 33914

SUBJECT: JAYDEN REALTY GROUP LLC

Ref. Number: L15000115516

We have received your document for JAYDEN REALTY GROUP LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 321A00027756