

# 116000151201

Florida Department of State  
Division of Corporations  
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((H19000175334 3)))



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JUGGERKNOT LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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T GLASS

JUN 04 2019

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

H19000175334 3

Juggerknot LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on August 12, 2016 and assigned  
Florida document number L16000151201

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office 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)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip 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 Changing Registered Agent, Signature of New Registered Agent**

Jun. 3. 2019 9:45AM

No. 0654 P. 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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Holli Stern	18122 Burr Oak Place	<input type="checkbox"/> Add
		Jupiter, FL 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Craig Stern	18122 Burr Oak Place	<input type="checkbox"/> Add
		Jupiter, FL 33478	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2019 JUN -3 PM 10:03  
APPROVED  
AND  
FILED

Jun. 3. 2019 9:45AM

No. 0654 P. 4

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

H19000175334 3

APPROVED  
CHD  
FILED

2018 JUN -3 AM 10:3

1. The first step is to identify the problem or question that needs to be addressed. This involves understanding the context and the specific requirements of the task.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective 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)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated May 31, 2019

Young Intern  
Signature of \_\_\_\_\_

Signature of a member or authorized representative of a member

Crainy Stereo

Typed or printed name of signer