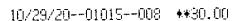
L16000182636

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2020

JASON PRIETO PO BOX 241 WINTER HAVEN, FL 33882

SUBJECT: JASON BUY HOUSES LLC

Ref. Number: L16000182636

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

THE PRINCIPAL ADDRESS MUST BE A STREET ADDRESS.

The designation of the registered agent must be at a Florida street address.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 920A00024688

COVER LETTER

Registration Section Division of Corporations

TO:

	YS HOUSES LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	JASON PRIETO		
		Name of Person	
	JASON BUYS HOUSES I	LC	
		Firm/Company	
	407 IST STREET S		
		Address	
	WINTER HAVEN, FLOR	IDA 33880	
		City/State and Zip Code	
	JASONSALES365@GMA		
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	all:	
JASON PRIETO		407 341-4600 at ()	
Name o	f Person	Area Code Daytim	e 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 Address Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	•
Tallahassee			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JASON BUYS HOUSES LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited I	Liability Company	were filed on 09/30/	2016	and assig	ned
Florida document number L160000182636	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liah	oility company here:	:		
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desig	nation "LLC" or the abb	previation "L.L.C	<u></u>
Enter new principal offices address, if appli	407 IST STREET	S			
(Principal office address MUST BE <u>A STREET ADDRES</u>		WINTER HAVEN.	, FLORIDA 33880		
				2021	
				JAH	. :
Enter new mailing address, if applicable:		407 IST STREET	S		
(Mailing address MAY BE A POST OFFICE BOX)		WINTER HAVEN	FLORIDA 33880		<u> </u>
				ـــــــــــــــــــــــــــــــــــــ	*
				20	
B. If amending the registered agent and/or agent and/or the new registered office addre	· ·	address on our reco	rds, <u>enter the name</u>	of the new 1	registered
Name of New Registered Agent:	JASON PRIETO				
New Registered Office Address:	407 IST STRE	ET S			
	 	Enter Florida	street address	<u> </u>	
	WINTER HAV	/EN	, Florida ³³⁸	80	
	-	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 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>	Name	Address	Type of Action
MGR	JASON PRIETO	407 IST STREET S	□Add
		WINTER HAVEN, FLORIDA 33880	□Remove
			🗏 Change
			□Remove
			Change
			□Add
			Remove
			□Change
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ective date, if other than the c effective date is listed, the date must	late of filing:	to date of filing or more tha	(optional)	ant to 605 020
ee: If the date inserted in this blo	ck does not meet the applica	able statutory filing requ	irements, this date will n	ot be listed a
ument's effective date on the Dep	barment of State's records.			
cord specifies a delayed effective	date, but not an effective ti	me, at 12:01 a.m. on the	carlier of: (b) The 90th	day after the
s filed.				
JANUARY 7	2021			
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S	ignoruse of a member of author	rized representative of a n	ieto.	