## L17000073749

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## **COVER LETTER**

Division of Cor					
SUBJECT:	NJMZ Holdings	LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing			
	·	·			
Please return all correspo	ondence concerning this matter	to the following:			
	Mary i	. 20ppardo Name of Person			
	•	Name of Person			
	MJM2	Hollings LLC Firm/Company			
		Firm/Company			
	36178	Emerald Coast Pa-	rliag		
		Address	U		
	Dostin FL 3	325a1			
		City/State and Zip Code			
	tuscanyeven	City/State and Zip Code  City/State and Zip Code  Compared to be used for future annual report notifications.	(antion)		
For further information of	concerning this matter, please ca		canony		
Michelle I	GNN.	at ( SSO ) 377- Area Code Daytime	3192		
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status & 🎞	
	ING ADDRESS:	STREET/COURI			
Divisio	ration Section on of Corporations	Registration Section Division of Corpora		第22 29 20 29 20 29	
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cer Tallahassee, FL 323		هُنْ الْجُدُّ	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited I.		-			
(A Florida Limited L	lability Company)				
The Articles of Organization for this Limited Liability Company	were filed on April 3, 2017 and	assigned			
Florida document number L 17000073749					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company here:				
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation	"L.L.C."			
Enter new principal offices address, if applicable:	36178 Emercial Coast PKLLY Doston, FL 32541				
(Principal office address MUST BE A STREET ADDRESS)	Dostin FL 32541				
Enter new mailing address, if applicable:	26178 Emerchal Court Pr	lu-l			
Mailing address MAY BE A POST OFFICE BOX)	Joshy PC 32541				
B. If amending the registered agent and/or registered of	fice address on our records, enter the nan	ne of the new			
registered agent and/or the new registered office address here		_			
	<del>⊊</del> ⇔	<b>-</b>			
Name of New Registered Agent:	## 14 ## ## ## ## ## ## ## ## ## ## ## ## ##	7			
New Registered Office Address:					
	Enter Florida street address	<u> </u>			
	, Florida	ο I			
	City : Zip Co	dê 💛			
New Registered Agent's Signature, if changing Registered Agent:		<b>?</b> ?			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar rovided for in Chapter 605, F.S. Or, if this de	with and ocument is			

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>	<u>Address</u>	Type of Action
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		Miranar Black, Fl 32550	Remove
			Change
AP	Mike Zuppardo	23 Sandestin Estetes Diriv	<u>C</u> □ Add
		Michael Beach, Fr 32550	Remove
		<del>-</del>	Change
<u> </u>	auglielno Fanni	35 Indgo Loop	🗆 Ádd
		Miraner Beach, FZ 32550	☐ Remove
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		date of filing:			(ontional)	LASAP)	
ffect	ive date, if other than the		cannot be prior to date	of filing or more than	90 days after filing	.) Pursuant to 60	5 0201
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