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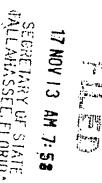
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COVER LETTER

	gistration Se vision of Cor			
SUBJECT:	J&S2 LLC			
SUBJECT		Name of Lim	ited Liability Company	····
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
		endence concerning this matter	_	
	ш ост. овр	manner contesting the manner	to the tone mig.	
		YUSUF AKYOL		
			Name of Person	
		J&S2 LLC		
			Firm/Company	***************************************
		11328 RIDGE ROAD		
			Address	
		NEW PORT RICHEY, FL	. 34654	
			City/State and Zip Code	
		E mail address:	to be used for future annual report not	Gastian
For further i	information c	oncerning this matter, please c	·	meanon)
YUSUF AI	KYOL		727 656 5179	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&S2 LLC		281. PA.
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	10 M
The Articles of Organization for this Limited Liab	pility Company were filed on JUNE 14, 2017	and assigned
Florida document number L17000130340	·	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the work Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)		he abbreviation "L.L.C."
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>en</u> ee address here:	nter the name of the new
Name of New Registered Agent:	YUSUF AKYOL	
New Registered Office Address:	Enter Florida street address , Florida	TAN 19 AM
New Registered Agent's Signature, if changing Reg	City	O Zip Code

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

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	<u>Address</u>	Type of Action
MGR	SOHAD YAAQOB	18121 LEAFWOOD CIR	Add
		LUTZ, FL 33558	■ Remove
			□ Change
			□ Add
			☐ Remove
			Change
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		 	Add
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			☐ Change
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			□ Remove
			☐ Change

BUSINESS PARTNER ANYMORE		
		7.
		10 J
		137 137 138
		SARY S
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		-
tive date, if other than the date of filing:		(optional)
fective date is listed, the date must be specific and cannot be prior t	o date of filing or more than 90	days after filing.) Pursuant to 6
If the date inserted in this block does not meet the applica nent's effective date on the Department of State's records.	ible statetory thing requires	nents, this date will not be in
cord specifies a delayed effective date, but not e 90th day after the record is filed.	an effective time, at	12:01 a.m. on the ear
10/19/2017,	·	
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	rized representative of a memb	7

Page 3 of 3

Filing Fee: \$25.00