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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC Account Number : I20200000121 Phone : (770)928-2700 Fax Number : (888)772-8108

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:______

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JUCHC, LLC

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JUN 1 5 2022

H22000207112 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUCHC, LLC (Name of the Limited Llability 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 06/29/2017 and assigned Florida document number L17000141668 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 "LLC." Enter new principal offices 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

New Registered Agent's Signature, if changing Registered Agent:

Page; 2 of 5

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

2022-06-14 19:39:58 GMT

18887728108

From: Mike Naterus

H220002071123

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

Title	<u>Name</u>	Address	Type of Action
MGR	GOLAB, MIGUEL H	1413 SANTA CRUZ AVE	
		CORAL GABLES, FL 33134	■ Remove
			Change
MGR	SCHAPERSTEIN, CLAUDIA D	1413 SANTA CRUZ AVE	
		CORAL GABLES, FL 33134	
			Change
MGR	FEGOLLLC	1413 SANTA CRUZ AVE	
		CORAL GABLES, FL 33134	Remove
			☐ Change
			D Add
			☐ Remove
			Change
		Add	
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

H22000207112 3

D. It amending any other information, enter changers) here: enter hands thornel there if mexessing i

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(He an effective date is fisted, the date must be specific and camon be prior to date of filing or more than 90 days after filing a forecast to mes (20) (25.5). Sute: It the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as me govament's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

MIGUEL H GOLAB Byped or printed teams of signer

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