## L17000229553

(Requestor's Name)
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2023 DEC 14 PH 3: 01 SECRETARY OF STATE TALLAHASSEE, FI

## **COVER LETTER**

10:		istration Sec sion of Corp			₩ 6:	e.	
eun ica	cano.		eative Investments, LLC	•			
SUBJEC	CI:		Name of Limi	ted Liability Company			
The encl	losed	Articles of A	Amendment and fee(s) are sub-	nitted for filing.			
Please re	eturn	all correspor	ndence concerning this matter	to the following:			
			Marc Ebling				
				Name of Person		2023 DEC SECRE	57 <b>4</b>
			7217 36th Ave E	Firm/Company		SECRETARY OF STATE	
			÷	Address		- (부a) - ( 파달) - (	بر ج
			Bradenton, FL 34208			(T)	
			marc@suncoasteg.com	City/State and Zip Code		_	
				to be used for future annual report notif	lication)		
For furt	her ii	nformation co	oncerning this matter, please ca	all:			
Marc E	bling			941 518-6253 at ( )			
		Name of	Person	Area Code Daytim	e Telephone Numbe	er	
Enclose	d is a	check for th	e following amount:				
\$25	5.00 f	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	rate of Status	
	Re Di	iling Address gistration S vision of C D. Box 632 Ilahassce, F	Section orporations 7	Street Address: Registration Seconds of Core The Centre of Tallahassee, FL	porations 'allahassee c Street, Suite	810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Company as it now</u> (A Florida Limited Liability Cor	v appears on our records.)		-
(A Florida Emined Blaumity Col	nparty)		
The Articles of Organization for this Limited Liability Company were filed	l on	and a	assigned
Florida document numberL17000229553			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability comp	pany here:		
AJ and CO, LLC			
he new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the a		"L.L.C."
Enter new principal offices address, if applicable:	7.	2023 SEC	
			2 5
Principal office address MUST BE A STREET ADDRESS)		C 12 4	n rees
		, -	<u> </u>
		<u> </u>	
Inter new mailing address, if applicable:	•••	က် ယု	ائي <sub>نس</sub> ية ــــــــــــــــــــــــــــــــــــ
Mailing address MAY BE A POST OFFICE BOX)	• •	<u> </u>	
			<u> </u>
If amending the registered agent and/or registered office address or gent and/or the new registered office address here:	n our records, <u>enter the nar</u>	ne of the r	iew reg
Name of New Registered Agent:			
New Registered Office Address:			
E	nter Florida street address		
	. Florida		
Cin		Zip Coc	

## 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

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 =	<b>Authorized Member</b>

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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fective date, if other than the date of filing:	ot be prior to d the applicable	late of filing or n e statutory filin	ore than 90 days a	after filing.) F	ursuant to	605.020 listed a
cument's effective date on the Department of State'	s records.					
record specifies a delayed effective date. The 90th day after the record is filed.	, but not a	n effective t	time, at 12:0	11 a.m. oi	n the ea	rlier (
December 7th 20	)23					
ted	<del>_</del>	ed representative				
<b>y</b> = /1						-