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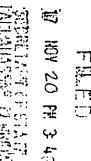
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COVER LETTER

i	Division of Corp	orations			
SUBJEC		NGS FOR THE LLC			
Name of Limited Liability Company					
The enclo	sed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspon	dence concerning this matter	to the following:		
		P. Christopher Wegner			
			Name of Person		
		Wegner Law PLLC			
Firm/Company					
		3510 Kraft Road, Suite 200)		
			Address		
		Naples, Florida 34105			
			City/State and Zip Code		
		cwegner@wegnerlawfirm.c	om to be used for future annual report not	viffaction)	
				meation	
For further	er information co	ncerning this matter, please ca	all:		
P. Christo	opher Wegner		239 449-9200 at ()		
Name of Person Area Code Daytime Telephone Num		ne Telephone Number			
Enclosed	is a check for the	following amount:			
\$25.0	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)	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JRC HOLDINGS FOR THE LLC		
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	ability Company were filed on November 14, 2017	and assigned
Florida document number L17000235384		
his amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
JRC HOLDINGS LLC		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company." the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET	(ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E		
B. If amending the registered agent and/oregistered agent and/or the new registered off	or registered office address on our records, <u>ente</u> ice address here:	r the name of the
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	100万里
New Registered Office Address:		Ten Ten Cy
	Enter Florida street address	5.00
	, Florida _	· ·
	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 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>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			□ Remove
			Change
			Add
			☐ Remove
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	runent of State's records.				
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Filing Fee: \$25.00