10/20/23, 2:47 PM

Division of Corporations

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Division of Corporations

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From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

Account Number : I20040000167 Phone : (305)377-0809

Fax Number : (305)377-0781

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JMFT HOLDINGS, LLC

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T. LEMEUX

OCT 23 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JMFT HOLDINGS, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/28/2017	and assigned
Florida document number L17000243841		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	900 S Pine Island Rd	
(Principal office address MUST BE A STREET ADDRESS)	Suite 670	
	Plantation FL 33324	
Enter new mailing address, if applicable:	900 S Pine Island Rd	
Mailing address MAY BE A POST OFFICE BOX)	Suite 670	
	Plantation FL 33324	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name	e of the new register
Name of New Designand Agent		; no 50
Name of New Registered Agent:		
New Registered Office Address:	Par El 1	
	Enter Florida street address	(시
	, Florida	Zin 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.

□Remove

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	Address	Type of Action
MGR	JAMILA MIRZAYEVA	900 S Pine Island Rd	
		Suite 670	
		Plantation FL 33324	■Change
			☐Change
			🗀 Add
			□Remove
			⊡ Change
			□Add
			□Remove
			[]Change
		<u> </u>	□Remove
		-	□Add

			
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		VE-12	
. Effective date, if other than the date of filing: _			
c. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and can Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable statuto	ing or more than 90 days after for filing requirements, this	nal) iling.) Pursuant to 605.0207 (3 date will not be listed as th
the record specifies a delayed effective date, but not an ecord is filed.	effective time, at 12:0	l a.m. on the earlier of: (b)	The 90th day after the
Dated September 22 , 2	023		
Signature of mem	ber or authorized represe	entative of a member	

Typed or printed name of signee