6:1:2018

Division of Corporations

Florida Department of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JG INNOVATION TRANSPORT LLC

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JUN 0 1 2018

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To: 18506176383 From: 12143052508 Date: 06/01/18 Time: 10:22 AM Page: 02/04

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JO INNOVATION TRANSPORT LLC			
Name of the Limited Liability Company (A Plorida Limited Lia	na it now apprairs on our records.)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>L17000260973</u>	ere filed on DECEMBER 22, 2017	and assigned	i
This ameriment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	(y company here;		
JG INNOVATION CARS LLC			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbi	reviation "LLC."	
Enter new principal offices address, if applicable:		, 0	<u>. —</u>
(Principal office address MUST BE A STREET ADDRESS)		r	
Enter new mailing address, if applicable:			
		-	10 mg
(Mulling address MAY BE A POST OFFICE BOX)			· 🌣
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter t	he name of the	to he new
Name of New Registered Agent:			
New Registered Office Address:	linter Florida street address		
	, Florida	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, Standars of New Registered Agent

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If amending	(Authorizad Parson(s) authorized to v) nangue, enfer the tifle, name, an	d address of each person, being added
or removed fr	om our records:	The same of the sa	
MGR = Ma AMBR = Au	nager thorized Mombor		
Tiffe	Nume	Address	Type of Action
			til Add
			□ Remove
			(T) Change
			DAdd
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(((H180001670303))) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _ (If no effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document'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. 2018 MAY 31ST Dated Signature of a member or authorized representative of a member FIGUEROA Typed or printed name of signed Page 3 of 3 Filing Fee: \$25.00

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