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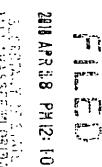
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J. HARRIS

COVER LETTER

	Registration Sec Division of Corp						
eud uzc		STACKS MOVING LLC Name of Limited Liability Company					
SUBJEC	·II:						
The enclo	osed Articles of A	amendment and fee(s) are sub-	mitted for filing.				
Please re	lurn all correspon	dence concerning this matter	to the following:				
		JOSHUA MAYORGA					
			Name of Person				
		Firm/Company					
		433 SOUTH DR					
		Address					
MIAMI SPRINGS, FL 33166							
		City/State and Zip Code					
		stacksmoving@gmail.com					
		E-mail address: (i	to be used for future annual report notifi-	cation)			
For further	er information co	ncerning this matter, please ca	all:				
JOSHU	A MAYORGA		305 423-9492 at()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed	is a check for the	following amount:					
\$25.0	0 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:

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

OTAGICA	1400		
STACKS	MUV	ING	LLC

(Name of the Limited Liability 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 03/13/2018 and assigned Florida document number L18000065937 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JCOM DIGITAL LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 190 WESTWARD DR, SUITE B Enter new principal offices address, if applicable: MIAMI SPRINGS, FL 33166 (Principal office address MUST BE A STREET ADDRESS) 190 WESTWARD DR. SUITE B Enter new mailing address, if applicable: MIAMI SPRINGS, FL 33166 (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: JOSHUA MAYORGA Name of New Registered Agent: 190 WESTWARD DR, SUITE B New Registered Office Address: Enter Florida street address . Florida 33166
Zip Code MIAMI SPRINGS

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.

Citv

hanging 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
MGR	CESAR FABREGAS	433 SOUTH DR MIAMI SPRINGS	
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ective date, if other than the date of the effective date is listed, the date must be specified.	of filing:	more than 90 days after fil)5.020
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he 90th day after the record is	s med.			
April 8	2018			
ANC-LIN	S			
Signar	ure of a member or authorized representat	ive of a member	2018	
•••			<u>≱•}ii ≱</u>	62 2.2
JOSHUA MAYORGA	Typed or printed name of signee		70 50 50 50 50 50 50 50 50 50 50 50 50 50	raes.
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	Page 3 of 3		PHI2:	kuss d r
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Filing Fee: \$25.00