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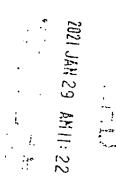
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## **COVER LETTER**

TO:

Registration Section

Division of Corporations			• • •	
polong Er	nterprises Leasing LLC			
	Name of Lim	ited Liability Company		
eles of An	nendment and fee(s) are sub-	mitted for filing.		
orresponde	ence concerning this matter	to the following:		
	Joseph J Campolong III			
		Name of Person		
		Firm/Company		
	8505 Beverly Lane			
		Address		
	St. Augustine, FL 32092			
		City/State and Zip Code		<del></del>
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<u>Address:</u> ation Sec	ction			
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	32314			
	eles of Amorrespondent of Period Record Reco	Polong Enterprises Leasing LLC  Name of Lim  Ples of Amendment and fee(s) are substrespondence concerning this matter  Joseph J Campolong III  8505 Beverly Lane  St. Augustine, FL 32092  Lynnecampolong@gmail.co  E-mail address: (i)  ation concerning this matter, please cang III  Name of Person  k for the following amount:  Fee  \$30.00 Filing Fee & Certificate of Status  Address: ation Section  of Corporations	Name of Limited Liability Company  Ples of Amendment and fee(s) are submitted for filing.  Perespondence concerning this matter to the following:    Joseph J Campolong III	Name of Limited Liability Company  reles of Amendment and fee(s) are submitted for filing.  prespondence concerning this matter to the following:    Joseph J Campolong III

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ZA:--2021 JAN 29 AMII: 22 **OF**

Campolong Enterprises Leasing 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 April 4, 2018 and assigned		
Florida document number L18000085730			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
JJLMC Leasing, LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	8505 Beverly Lane		
(Principal office address MUST BE A STREET ADDRESS)	Saint Augustine, FL 32092		
Enter new mailing address, if applicable:	8505 Beverly Lane		
(Mailing address MAY BE A POST OFFICE BOX)	Saint Augustine, FL 32092		
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 of the new register		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Florida		
	City Zip Code		

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager Authorized Member	2021	
<u>Title</u>	<u>Name</u>	2021 JAN 29 AH 11: 22	Type of Action
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Note: If the date inserted in this	the date of filing:  The date of filing:  The date of filing:  The date of filing:  The date of specific and cannot be prior to date of specific and cannot be prior t	(optional)  of filing or more than 90 days after filing.) Pursu tutory filing requirements, this date will n	uant to 605,0207 ( ot be listed as th
	etive date, but not an effective time, at 1	2:01 a.m. on the earlier of: (b) The 90th	a day after the
d is filed.	$\sim \sim 11$		
d is filed.  January 22  Dated	3021		
	Signature of a member of authorized rep	presentative of a member	

Filing Fee: \$25.00