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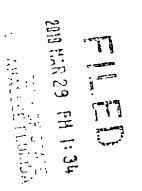
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COVER LETTER

Division of Cor			
GANESH SUBJECT:	HOLDINGS OF JAX LLC		-
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and feets) are sub	mitted for tiling.	
	ondence concerning this matter	-	
	Mark B MacLean, Esq.		
	Mark B. MacLean, Attorney	Name of Person y at Law	
			_
	2033 Flesher Avenue	Firm/Company	
	Jacksonville, Florida 32207	Address	_
	MacLeanEsq@aol.com	City/State and Zip Code	_
	E-mail address: (to be used for future annual report notification)	•
For further information e	oncerning this matter, please ca	all:	. 63
Mark MacLean		904 399-2829	2019
Name o	f Person	Area Code Daytime Telephone Numb	ner 3
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee. cate of Status & 2 ed Copy: nal 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

GANESH HOLDINGS OF JAX 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 ____ ____ and assigned Florida document number _____L18000104668 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

. Florida

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>	Address	Type of Action
MGR	GANESH BUSINESS GROUP LLLP	644 CESERY BLVD JACKSONVILLE. FL 32211	□ Add
			Remove
			☐ Change
MGR	Vipul R Patel	644 CESERY BLVD JACKSONVILLE, FL 32211	
			Remove
			Change
			Remove
			Change 20 Add
			☐ Remove
			□ Remove
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effective date is listed, the date must be the date inserted in this bloc ument's effective date on the Dep.		ing or more than 90 days after fil- ory filing requirements, this da	ing.) Pursuant to 605.0 ate will not be listed
record specifies a delayed enter the recor	ffective date, but not an effe d is filed.	ctive time, at 12:01 a.n	n. on the earlier
March 28	2019		

Page 3 of 3

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