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COVER LETTER

TO:	Registration Se Division of Cor			
SURIE	CT. Darate	n GRital Group	LC	
30031			ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Besiamin Jaco	Name of Person	· · · · · · · · · · · · · · · · · · ·
			Firm/Company	
		143 Isle verde u	Day	
			Address	
		Palm Beach Gan	dens, fc 33<18	
		- · -		
		Benvance (o God (c E-mail address: (1	on be used for future annual report no	tification)
For fur	ther information co	oncerning this matter, please ca	all:	
iood	amin Jaa	ahan	-1, 561 , C25- li	X12
200		f Person	at (<u>561</u>) <u>C25 - 10</u> Area Code Daytin	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
~ਧ \$2.	5.00 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)
	MAIL	ING ADDRESS:	STREET/COUR	IER ADDRESS:
		ation Section n of Corporations	Registration Secti Division of Corpo	
	P.O. Bo	ox 6327 issee, FL 32314	Clifton Building 2661 Executive C	
			2001 2.1024117	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jacobson Capital Gra	XLL_C			
(Name of the Limited	d Liability Company as it now app A Florida Limited Liability Compar	pears on our records.)		
	Thomas Balancy Company	413612012	75.55 19	
The Articles of Organization for this Limited Lia	bility Company were filed on		and assigned -	17
Florida document number <u>L\8000 60424</u>	,	·	5	
This amendment is submitted to amend the follow	wing:			. : :
A. If amending name, enter the new name of t	the limited liability company	there:	:: ::	,
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," t	he designation "LLC" or the a	bbreviation "L.L.C."	_
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	`ADDRESS)			_
			<u>.</u>	
Enter new mailing address, if applicable:		<u> </u>		
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			_
	-			_
	' A 1 0° 13		.1 6.4	
B. If amending the registered agent and/or registered agent and/or the new registered offi	• •	on our records, enter	the name of the	new
Name of New Registered Agent:				
New Registered Office Address:				
· ·	Enter	Florida street address		
		, Florida		
	City		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.

Changing 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	Zachary Jacobson	114 San marita way	
		P8G, F2, 38418	∑ Remove
			Change
			☐ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			Remove
			Change

). If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effo Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	<u> </u>
	Signature of a member or authorized representative of a member
	Ben Jaoban
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00