# L18000124281

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### **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	Jennifer Name of Limit	Penates, LL ded Liability Company	<u>C</u>
The enclosed Articles o	f Amendment and fee(s) are subn	nitted for filing.	
Please return all corresp	condence concerning this matter to	o the following:	
	J	ennifer P. Marst	0)
	Jennifer	P. Marston, LL Firm/Company	<u>C</u>
	7521 NW	174th Terr. Address	
	Jennifer 1 E-mail address: (to	City/State and Zip Code  1 + VEVPOITOVOC  o be used for future annual report not	exmail. Com
For further information	concerning this matter, please ca	II:	
Jenni (A	of Person		8683 e Telephone Number
Enclosed is a check for	the following amount:		
□ \$25,00 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)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jenniter Fenc		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on May 17,2	D18 and assigned
Florida document number <u>L18000124281</u>	1	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<del>-</del>	
Jennifer P. Marst	ton, LLC	
The new name must be distinguishable and contain the words 'Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)		
		2021
		<del>/</del> 7
Enter new mailing address, if applicable:	7521 NW 1747	Terv = F
(Mailing address MAY BE A POST OFFICE BOX)	7521 NW 1747 Higher, FL 33	015
		29
B. If amending the registered agent and/or registered office and a second second agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	Jennifer P. Mars	iton
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
N. B. J. J. J. S.	Cip	лір Сойе

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

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>	Name	Address	Type of Action
AMBR	Jennifer Penates	19025 NW 62rd Ave Apt 104	□Add
		maleah, FL 33015	XRemove
			□Change
AMBR	Jennifer P. Marston	7521 NW 174th Terr	X(Add
		Halpah, FL 33015	□Remove
			□Change
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n effective date is liste <u>te:</u> If the date inse								
n effective date is liste te: If the date insectument's effective ecord specifies a de	layed effective date.	, but not an e	ffective time.	at 12:01 a.m.	on the earlier	of:(b) The	e 90th day	after the
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