To:

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 720010000062

Phone : (323)962-9600

: (323)962-3889 Fax Number

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please. \*\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JOLLY INNOVATIVE SOLUTIONS LLC

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## COVER LETTER

	legistration Se Division of Cor			
		MOVATIVE SOLUTIONS	LLC	
SUBJECT	ı:	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please rete	irn all correspo	indence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N. Brand Blvd., 11t	h Floor	
			Address	
		Glendale, CA 91203		
			City/State and Zip Code	<del></del>
		errolbrissett@gmail.com	to be used for future annual report notifi	(retion)
For furthe	r information c	oncerning this matter, please or		icinios,
Cheyenn	e Moseley		800 773-0888 es	ct. 972 <b>4</b>
	Name o	f l'erson	Area Code Daytime	Telephone Number
Enclosed i	s a check for th	ne following amount:		
□ \$25.00	) Fiting 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)
	<b>b.</b>	DEC ADDRESS.	STREET/COURT	TR ADDRESS:

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 Tailahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOLLY INNOVATIVE SOLUTIONS LLC (Name of the Limited Liability Comms (A Florida Limited	ony as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L18000135800  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ellity company here:
The new name must be distinguishable and end with the words "Limited Link	oility Company," the designation "LLC" or the abbreviation "L.T.C."
Enter new principal offices address, if applicable:	9351 NW 37th Court
(Principal office address MUST BE A STREET ADDRESS)	Sunrise, Florida 33351
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	9351 NW 37th Court Sunrise, Florida 33351
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del> -	City Zip Code
New Reglytered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr	ee 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

То

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			[] Add
			CI Remove
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9351 NW 37th Court, Sunrise, Florida 33351	
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nted 06/26/18	
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Dated 06/26/18  Signature of a member or authorized represent	iative of a member
A COLA	ative of a member

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