From: Richard York

4/5/22, 7:07 AM

Division of Corporations



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(((H22000123173 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062

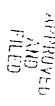
Phone : (323)962-8600 : (323)962-3889 Fax Number

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JP INFINITY LLC

Certificate of Status	0
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Help

AFR-5

COVER LETTER

TO: Registration Se Division of Cor				
JP INFINIT	TY LLC			
Name of Limited Liability Company				
	Amendment and fee(s) are submondence concerning this matter t			
Cheyenne Moseley				
		Name of Person	·····	
Legalzoom.com, Inc.				
		Firm/Company		
101 N Brand Blvd 11th Fl				
Address				
Glendale, CA 91203				
City/State and Zip Code				
	vsingian@gmail.com	o be used for future annual report notifi	ention)	
For further information of	concerning this matter, please ca		Cations	
Cheyenne Moseley		800 773-0883		
Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for t	ne tonowing amount.			
□ \$25.00 Filing Fcc	\$30.00 Filing Fcc & 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)	

MATLING 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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JP INFINITY LLC				
(Name of the Limited Liability Compa (A Florida Limited I	nv as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L18000144600	were filed on 06/12/2018	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company "the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	229 Cumberland Cir W			
(Principal office address MUST BE A STREET ADDRESS)	Longwood, Florida 32779			

Enter new mailing address, if applicable:	229 Cumberland Cir W			
(Mailing address MAY BE A POST OFFICE BOX)	Longwood, Florida 32779			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		r the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address	55 FEB		
	, Florida	19:		
	Cuy	· Zip Ç iv le		

New Registered Agent's Signature, if changing Registered Agent:

Page: 3 of 6

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>	<u>Name</u>	Address	Type of Action
AMBR	Vicente Singian		
			☐ Remove
		229 Cumberland Cir W Longwood, Florida 32779	⊞ Change
	·		D Add
			Remove
			☐ Change
			□ Add
	·		☐ Remove
		·	
			Remove
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			D Add
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			Change
			Add
			☐ Remove
			☐ Change

o: +18506176383	Page, 5 of 6	2022-04-05 05:10:18 PDT	LegalZoom.com, Inc.	From: Richa
D. If amending	any other information, en	ter change(s) here: (Attach additio	nal sheets, if necessary.)	
<u></u>				
				
		····		
				
			_	
				
				
				
				
E Effactive dat	te if other than the date of	filina:	(optional)	
Note: If the o	ate is listed, the date must be speci date inserted in this block does effective date on the Departmen	filing: fic and cannot be prior to date of filing or me not meet the applicable statutory filing at of State's records.	ore than 90 days after filing.) Pursuant to prequirements, this date will not be	o 605.0207 (3)(b) listed as the
If the record s (b) The 90th	pecifies a delayed effect day after the record is f	ive date, but not an effective ti îled.	me, at 12:01 a.m. on the e	arlier of:
Dated March	29	2022		
	/			
_	Signature	e of a member or authorized representative	of a member	-
V	icente Singian			
-	<u>-</u>	Typed or printed name of signee		_

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Filing Fee: \$25.00