118000187995

(Re	equestor's Name)	
(Ad	ldress)	
(, , ,		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name))
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	
	Q. SILAS	
	JUN 60 2022	
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	(COVER LETTER		
TO: Registration S Division of Co		· · · · · · · · · · · · · · · · · · ·		
FJ LEGEN	NDS.LLC			
SUBJECT:	Name of Lim	ited Liability Company		
		•		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	ESTEBAN VELEZ			
		Name of Person		
	FJ LEGENDS.LLC			
		Firm/Company	· · · · ·	
	9070 NW 35TH PL			
		Address		
	SUNRISE, FL 33351			
		City/State and Zip Code		
	INFO@JCBSOLUTIONSI E-mail address: (NC.NET to be used for future annual report not	ification)	
For further information	concerning this matter, please c	all:		
ESTEBAN VELEZ		866 296-1833		
Name	of Person	at () Area Code Daytin	ne Telephone Number	
		•		
Enclosed is a check for t	the following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addre</u>		Street Address:		
Registration Division of (Registration Section Division of Corporations	
P.O. Box 633	27	The Centre of	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

7022 JUN -6 PM 4:5

(Name of the Limited Liability Company as it now appears on only TOUS: HASSEE, FL (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/06/2018}{2}$ ____ and assigned Florida document number L18000187995 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 "L.L.C." 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 City

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

FJ LEGENDS.LLC

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
AP	SR ESTEBAN VELEZ	<u>.</u>	9070 NW 35TH PL SUNRISE, FL 33351	□Add
				■Remove
				□Change
MGRM	MGRM ESTEBAN VELEZ	_	9070 NW 35TH PL SUNRISE, FL 33351	■Add
				□Remove
				□ Change
		_		□Add
				□Remove
				□ Change
				□Add
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				□Remove
				□Change

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Note: I	ive date, if other than the date of filing: [fective date is listed, the date must be specific and cannot be prior to date of filing or mor If the date inserted in this block does not meet the applicable statutory filing ment's effective date on the Department of State's records.	(optional) e than 90 days after filing.) Pursuant to 605.020 requirements, this date will not be listed a
record d is file	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. or iled.	the earlier of: (b) The 90th day after the
Pated _	06/06/2022	
	Signature of a member or authorized representative of	f a member

Filing Fee: \$25.00