[redacted]

L18000192809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/18/24--01018-025 **25.00

K. HUNT
03/18/24

COVER LETTER

TO: Registration Section
Division of Corporations

JIMMY & DAINISHA LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dainishia King
_____
Name of Person

_____
Firm/Company

854 Ali Baba Ave
_____
Address

Opa - Locka FL 33054
_____
City/State and Zip Code

Juice4yoursoul@ zoho.com
_____
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Dainishia King 786 352-6734
_____ at (_____) _____
Name of Person Area Code Daytime 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

JIMMY & DAINISHA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/13/2018 and assigned Florida document number L18000192809.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JUICE4YOURSOUL LLC

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)

854 ALI BABA AVE
OPA LOCKA, FL 33054

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1166 NW 79TH STREET
APT 103
MIAMI FL 33150

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: 854 ALI BABA AVE
Enter Florida street address

OPA-LOCKA FL, Florida 33054
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

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

Title	Name	Address	Type of Action
MGR	Dainishia King	854 ALI BABA AVE	
		OPA - LOCKA FL 33054	☐ Add
			☐ Remove
			☒ Change
OWNER	Dainishia King	854 ALI BABA AVE	
		OPA - LOCKA FL 33054	■ Add
			☐ Remove
			☐ Change
MGR	Jimmy Andre	854 ALI BABA AVE	
		OPA - LOCKA FL 33054	☐ Add
			☐ Remove
			☒ Change
OWNER	Jimmy Andre	854 ALI BABA AVE	
		OPA - LOCKA FL 33054	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 17 2024

Dainishia King
Signature of a member or authorized representative of a member

Dainishia King
Typed or printed name of signee

Filing Fee: $25.00