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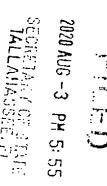
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JM3 Elike Services LLC 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:	
Jason Mathews Name of Person	
JM3 Elite Services LLC	
127 NW 10th AVR Suite 10	0
Delsay Beach, F1 334444 City/State and Zip Code	2020 AUS -3 DECHLIA TALLAHA
E-mail address: (to be used for future innual report notification	\mathcal{L}_{j}
For further information concerning this matter, please call:	F 5
Tasm Mathews at (561) 2:51-45 Name of Person Area Code Daytime Telep	360
Enclosed is a check for the following amount:	,
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ Certificate of Status □ 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

JM3 Elite Service	5 1-6	C				
(Name of the Limited Liabil (A Florid	lity Company da Limited Lia	y as it now appears o ability Company)	n our recor <u>ds.</u>)			
The Articles of Organization for this Limited Liability (Florida document number <u>L18000309386</u>	Company w 	vere filed on	8/3//BDI	<u>&</u> ar	ıd assi	gned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lim	nited liabili	ity company here				
The new name must be distinguishable and contain the words "Lin	 mited Liability	y Company," the desig	nation "LLC" or the	abbreviati	on "L.L	C."
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDI	RESS)		_			
			·			
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
			·	 -		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office ad	dress on our reco	rds, enter the na	ıme of th	e new	registered
				장	2020	
Name of New Registered Agent:					AUG	17
New Registered Office Address:					చ	i, ean
		Enter Florida	street address	Cara	МЧ	
			, Florida .	Zip (<i>කෑ∞</i> ට්	<u></u>
				ر بردی از	70	

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 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
MBR	Jason Matthews	127 NW 1044. Ave	🗆 Add
		Suite 100	□Remove
		Delray Beach, \$1 334	Change
MGR	Natalie Eugene	2832 Quartum Lakes Dri	D □ Add
	V	Boynton Beach, Fl	□Remove
		33426	Change
			□Add
			Signature
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fective date, if other than the date of filing:	(optional) The than 90 days after filing.) Pursuant to 6	605.02
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of stilled.	on the earlier of: (b) The 90th day a	fter the
ed July 16th 2020.		