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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	L & J Inve	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Jan	w Hart	
	<u> </u>	Tavest ment (	oce-f
	7000	npland Glade Address	
	Tallchosse	City/State and Zin Code	
	+jh 2///	City/State and Zip Code  O j Closs J. Con  o be used for future annual report notal	(Cation)
For further information c	oncerning this matter, please ca		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Lance Name o	Hc-+ if Person	at ( <u>\$50</u> ) <u>25/-</u> Area Code Daytime	4472 e Telephone Number
Enclosed is a check for the	he 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

		Del LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	<u>y as it now appears on</u> ability Company)	ouv records.)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>LIROOO2323@</u> [.	vere filed on	/3/18	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the desig	nation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			2019 OCT -4 AM11:
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ir records, <u>enter</u>	r the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
		. Florida	
	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. Thereby 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
Mary.	Tanner Hart	1601 Eagles Linding Blud Tall FC 32308	ZAdd
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			Change
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Tective date, if other than the neffective date is listed, the date in this listed in this listed in the late on the late of t	block does not meet	the applicable state	filing or more than 9 story filing require	(optional) 0 days after filing.) Poments, this date wi	ursuant to 605 Il not be list
record specifies a delaye he 90th day after the re	cord is filed.				the earli
IN October 4		2019			
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Jeff	e 1				

Page 3 of 3

Filing Fee: \$25.00