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(Cit	y/State/Zip/Phone #)
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FLORIDA DEPARTMENT OF STATE AM II: 36

Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FL

February 28, 2022

PETR VENCOVSKY 2318 NE 2ND AVE MIAMI, FL 33137

SUBJECT: JETSURF USA LLC Ref. Number: L18000233882

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

L21000147396 EPIC RIDES, LLC

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

www.sunbiz.org

Letter Number: 322A00004822

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Petr Vencousky
JPISUY F USALLC Firm/Company
2318 NEZNO AUC
MI AMI FL 33137 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at 305, 538, 7073 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

TO:

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

FILED

JET SUYF U	SA LLC 2022 MAR II	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recurded ETARY TALLAHAS	OF STATE
The Articles of Organization for this Limited Liability Company Florida document number <u>LICODO23 CG2</u> .	11 10 10 111	_ 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:	
EPICRIDE, USA.	LLC,	
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2318 NE 200 AV	viation "L.L.C." 131
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2310 NF 2nd A MIQMI FL 331	ve 37
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name o	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	C . C	
	Enter Florida street address	
	, Florida	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 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
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			□Remove
			□Change
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effective date is listed, the e: If the date inserted	e date must be specific	c and cannot be prior		nore than 90 days after	filing.) Pursuant to 605.	
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	Signature o	of a member or auth	orized representativ	e of a member		

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