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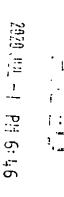




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## **COVER LETTER**

TO:

Registration Section Division of Corporations

| SUBJECT: Juicys LLC                                   | No.   |   |
|---|---|---|
| Nar   | me of Limited Liability Company                                       | _   |
|   |   |   |
| The enclosed Articles of Amendment and fee(s          | s) are submitted for filing.  |   |
| Please return all correspondence concerning the       | nis matter to the following:  |   |
|   |   |   |
| Darier  | n Sanchez<br>Name of Person   |   |
|   | Firm/Company  |   |
|   | Firm/Company  |   |
| 11 Ne   | ptune Road Unit B   |   |
|   | Address   |   |
| Kissi   | MMRC FL 34744/ City/State and Zip Coole                               |   |
|   | City/State and Zip Code   | 7-4-BB1-  |
| <u> 3350i</u>   | address: (to be used for future annual report notification)           |   |
| E-mail  | address: (to be used for future annual report notification)           |   |
| For further information concerning this matter,       | ; please call:  |   |
| Darien Sänchez  | at ( <u>917</u> ) <u>304 58 94</u><br>Area Code Daytime Telephone Nur |   |
| Name of Person  | Area Code Daytime Telephone Nur                                       | mber  |
|   |   |   |
| Enclosed is a check for the following amount:         |   |   |
| \$25.00 Filing Fee \$30.00 Filing Fe Certificate of S | Status Certified Copy Certi (additional copy is enclosed) Certi       | 0 Filing Fee,<br>ificate of Status &<br>ified Copy<br>ional copy is enclosed) |
| Mailing Address:                                      | Street Address:   |   |
| Registration Section Division of Corporations         | Registration Section Division of Corporations                         |   |
| P.O. Box 6327   | The Centre of Tallahassee   |   |
| Tallahassee, FL 32314                                 | 2415 N. Monroe Street, Suit<br>Tallahassee, FL 32303                  | te 810  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Juicys LL  |   |  |                                      | 232                   |        |
|--|---|--|--------------------------------------|-----------------------|--------|
| (Name of the Limite  | d Liability Com<br>A Florida Limite             | pany as it now appears<br>d Liability Company) | on our records.)                     | = 11                  |        |
|  |   | , , ,  | First Time.                          | 10( )                 |        |
| The Articles of Organization for this Limited Lia  | ability Compar                                  | ny were filed on <u>8</u> で                    | m Uctober 31                         | 15 and assigned       |        |
| The Articles of Organization for this Limited Lia Florida document number <u>L18000253</u> This amendment is submitted to amend the follo                  | <u>54.74                                   </u> | Second T                                       | ime: Novemb                          | 127, 蒙19:             |        |
| This amendment is submitted to amend the follo   | wing:   |  |                                      | ։ կճ                  |        |
| A. If amending name, enter the new name of   | the limited lia                                 | bility company here                            | <u>e</u> :                           |                       |        |
| N/A  |   |  |                                      |                       |        |
| The new name must be distinguishable and contain the wo  | ords "Limited Lia                               | bility Company," the des                       | ignation "LLC" or the                | abbreviation "L.L.C." | _      |
| Enter new principal offices address, if applica  |   |  |                                      |                       | _      |
| (Principal office address MUST BE A STREE)   | T ADDRESS)                                      | <u> </u>                                       |                                      |                       |        |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE E   | <u>8<i>0X</i>)</u>                              | N/A  |                                      |                       | -<br>- |
| B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address: | Xavie   | Sierra C                                       | 1 GUEZ<br>11 CLE<br>a street address | 34744                 | _      |
|  |   | 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 Yew 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                                | <b>Type of Action</b> |
|--------------|----------------------|--|-----------------------|
| MBR          | Xavier Ali Rodriguez | 1346 Sierra Cir Kissimmee<br>FL 34744. | - NAdd                |
|              |                      |  | □Remove               |
|              |                      |  | □Change               |
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|              |                      |  | []Add                 |
|              |                      |  | □Remove               |
|              |                      |  | □Change               |

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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  |  |
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| E. Effective date, if other than the date of filing:   | ant to 605.0207 (3)(to the listed as the |
| If the record specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on th (b) The 90th day after the record is filed. | e earlier of:                            |
| Dated O6.17.20  Davier Darhon  Signature of a member or authorized representative of a member  Darien Sanchez  Typed or printed name of signee |  |
| Danier Airban  |  |
| Signature of a member or authorized representative of a member   |  |
| Darien Sänchez   |  |
| Typed or printed name of signee  | <del></del>                              |

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