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SECRETARY OF STATE

COVER LETTER

SUBJECT:	JANUS PROPERTY HOLD	ING LLC	
30bat.e1.	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter t	to the following:	
	ROSI ALVES		
		Name of Person	
	TAX SOLUTIONS & BOO	DKKEEPING LLC	
		Firm/Company	
	7751 KINGSPOINTE PKW	YY SUITE 119	
		Address	
	ORLANDO - FL - 32819		
	TAXES.SOLUTIONS100@	City/State and Zip Code GMAIL.COM	
	E-mail address: (to	o be used for future annual report notific	ration)
For further information c	oncerning this matter, please ca	II:	
ALEX FREIRE		407 399-1611 at ()	
Name o	f Person	Area Code Daytime	Felephone Number
Enclosed is a check for the	ne following amount:		
S25.00 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

TO:

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

FILED

2018 DEC 10 PM 1:58

JANUS PROPERTY HOLDING LLC

SECRETARY OF STATE

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liah	nility Company were filed c	on11/17/2018	and assigned
Florida document numberL18000268724	·		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability compa	ny here:	
JANUS PROPERTY H	OLDINGS LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company,"	"the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole: N/A		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	, <u>.</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ss on our records, <u>e</u>	nter the name of the new
registered agent and/or the new registered only	ee address here.		
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
	Ente	er Florida street address	
		, Floric	la
	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

GR = N $MBR = A$	lanager authorized Member		
<u>itle</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			□ Change
			□ Remove
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an effe (ote:	ve date, if other than the openive date is listed, the date must If the date inserted in this blocant's effective date on the De	be specific and cannot be pick does not meet the ap	plicable statutory filing	(optional) re than 90 days after filing.) Pr requirements, this date wi	ursuant to 605.0207 Il not be listed as
e rec The	ord specifies a delayed 90th day after the reco	effective date, but ard is filed.	not an effective til	me, at 12:01 a.m. on	the earlier of
ated_	NOVEMBER 26	201	#U \		
		- 3	' l		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00