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: (850)617-6383

From:

Account Name : GULATI LAW Account Number : I20130000014

Phone

(407)900-5054

Fax Number

: (407)517-4931

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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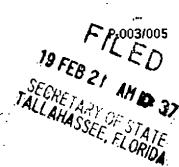
FEB 22 2019

TO:

COVER LETTER

TO: Registration Division of C			
JTT EAC	BLES, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles	of Amendment and fee(s) are subm	nitted for filing.	
Pléase return all corres	pondence concerning this matter to	a the following:	
	Sarah Gulati, Esq.		
		Name of Person	
	Gulati Law, P.L.		
		Firm/Company	
	479 Montgomery Place		
		Address	·
	Altamonte Springs, Florida	32714	
•	sarah@gulatilaw.com	City/State and Zip Code	
	•	be used for future annual report not	ification)
For further information	concerning this matter, please cal	1:	
Sarah Gulati, Esq.		407 900-5054 at ()	
Name	e of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the 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)
Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



JTT EAGLES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/03/2018 and assigned Florida document number L18000278123 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida _

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 Eagles Legacy, Inc.	Address 479 Montgomery Place	Type of Action
MGRMBR		Altamonte Springs, FL 32814	
			□ Remove
			Change
MBR	Bhupinder Sodhi		- FOND T
			B'Adda 2
		 -	Cestage w
MBR	Saranjit Sodhi		□ Ādd
			Remove
			E Change
			D Add
			Change
			Add
			□ Remove
			Change
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			□ Change

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Tective date, if	To ther than the date of filing: (optional) I sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.03
an effective date is ote: If the date i	listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
ocument's effecti	ive date on the Department of State's records.
	Ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
ine your day	after the record is filed.
ated	
	Signature of a member of authorized representative of a member South

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