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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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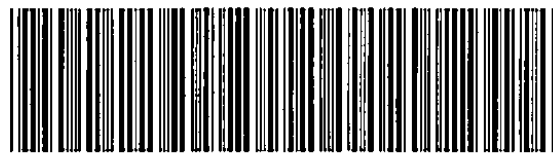
(Business Entity Name)

(Document Number)

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JUL 1 2019  
FBI - JEFFERSON

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# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JR Sunny Side Quarters, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Shults

Name of Person

Corporate Direct, Inc.

Firm/Company

2248 Meridian Blvd Ste H

Address

Minden, NV 89423

City/State and Zip Code

LSHULTS@CORPROATEDIRECT.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Shults

Name of Person

at ( 775 ) 284-7167

Area Code

Daytime 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)

**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

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

This amendment is submitted to amend the following:

JRX Wealth Capital 305, LLC

**Enter new principal offices address, if applicable:**

172 Center Street, Ste 202

Jackson, WY 83001

P.O. Box 2869

Jackson, WY 83001

Name of New Registered Agent:

**New Registered Office Address:**

*Enter Florida street address*

\_\_\_\_\_, Florida  
City

Zip Code

*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.*

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
MGR	JRX Wealth Capital, LLC	172 Center Street, Ste 202, Jackson, WY 83001	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Julio R Barcelo, JR	16711 Collins Ave., Sunny Isles Beach, FL 33160	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

Dated June 12 2019

Julio R Barcelo, JR, Manager of JRX Wealth Capital, LLC  
Typed or printed name of signee