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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: JAH CUSTOM WIRING SOLUTIONS 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:
TJUHUIRY Braffith Name of Person
JUSTA CUSTOM WIRING SOLUTION LLC.
2185 RODOKT I CONKIN BIVOI FIRT 109
Palm Bary F1, 32905 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TICINITY BY CIFFITH at (S(1)3) 484-2494  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee  □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

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

UAH CUSTOM WIRT NO (Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Comparing document number 1900023482.  This amendment is submitted to amend the following:	iny were filed on Dr. Om Vol 12, 2018 and assigned
A. If amending name, enter the new name of the limited li	iability company here:
J.U.S.T.A CUSTOM WITING SOLUTION The new name must be distinguishable and contain the words "Limited Li	ability 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)	2185 Robert J Conlan Blud: Apt 109 Palm Bay F1, 32905
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2185 Robert J Conlan Blud Apt 109 Dalm Bay F1, 32905
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: Ty	invier & Braffith
New Registered Office Address: 2185 R	Enter Florida street address
Daln	City, Florida 32905 Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wit provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MCIR	Christim Vannom	HOLMILITARY TYL APT 108	Add
		Supiter Fl. 33458	□Remove
			□Change
MYJR	Tjanyier E. Braffindr,	2185 Robert J Conlain Blvc	<b>∠</b> Add
		APT 109 Prim Bay Fi 329	∑□Remove
			□Change
MCIR	Tichyler Braffith	2185 Robert J. Conlan Blva	<u> </u> XAdd
		Apt 109 Palm Bry F1,3290	∑□Remove
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Effective date, if other than the date of filing:  [In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207  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.  Treed or specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed.  Dated DECEMBER 28, 2020.  Signature of a member or authorized representative of a member  Typed or printed name of signere.	-	N/H
Effective date, if other than the date of filing:  [an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 More; If the date inserted in fins 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.  Exercord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d is filed.  Dated DECEMBER 28 2020,  Signature of a member or authorized representative of a member		
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Signature of a member or authorized representative of a member		
	Dated	December 28, 2020,
Transmitter Reaction		Signature of a member or authorized representative of a member
		The Real College