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Special Instructions to	Filing Officer:	

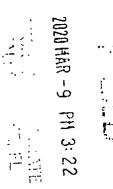
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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Leg Godt Jupiter 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:
Jan Anderson Name of Person
Leg Goot Jones U.C.
232 Hampton ct
Jupiter FL 33458 City/State and Zip Code  Jan d. andersen and com E-mail 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:
Jan Anderson at (631) 974 6856  Name of Person Area Code Daytime Telephone Number
Enclosed is a check-for the following amount:  \$\sum_{\text{S25.00 Filing Fee}}\$ \square \$\square \$\qq \$\qquare \$\square \$\square \$\square \$\square \$\square \$\square \$\qq \$\q \$\qq \$\qq \$\qq \$\qq \$\qq \$\qq

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

Leg Godt Jupiter		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our red Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company	were filed on $2/2a$	and assigned
Florida document number <u>L 19 ccos 439 22</u>		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
A-GLAMPS LLC The new name must be distinguishable and contain the words "Limited Liabi		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	232 Hampi	ion Ct
(Principal office address MUST BE A STREET ADDRESS)	Jupiter F	Con Ct -L 33458
	<del></del>	
Enter new mailing address, if applicable:	Same	2020
(Mailing address MAY BE A POST OFFICE BOX)		HAR
		9
		P
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	dress
	,	Florida
	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

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	Type of Action
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			□Change
CEO	Jan Andersen	232 Hampton ct	🗆 Add
		Jupiter FL 33458	□Remove
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