L19 0000 72597

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer; |
| |
| |
| |
| |
| |





000345649060

06/05/20--01006--015 **25.00

220 JUT - 5 - PM 6: 51.

O \$1..... 0203

JUN 22 2020

COVER LETTER

Registration Section **Division of Corporations**

| | agement LLC | | • |
|---------------------------|--|---|--|
| | | ited Liability Company | |
| enclosed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| ase return all corresp | ondence concerning this matter | to the following: | |
| | Joshua Rosenberg | | |
| | | Name of Person | |
| | Jdayz Management LLC | | |
| | | Firm/Company | |
| | 209 N Missouri Ave | | |
| | | Address | |
| | Clearwater, FL 33755 | | |
| | | City/State and Zip Code | |
| | jdayzmanagement@gmail.c E-mail address: (| om to be used for future annual report notif | ication) |
| or further information | concerning this matter, please ca | all: | |
| oshua Rosenberg | | 470 5724894 at () | |
| Name (| of Person | Area Code Daytime | e Telephone Number |
| Enclosed is a check for t | he 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 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**

2020 JULY -5 PH 6: 55

Jdayz Management LLC

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

| | March 14, 2010 | |
|---|---|--|
| 2 Articles of Organization for this Limited Liability Company | wwere filed on March 14, 2019 and assignment | |
| orida document number L19000072597 | | |
| is amendment is submitted to amend the following: | | |
| If amending name, enter the new name of the limited liab | bility company here: | |
| M.Tiger LLC | | |
| e new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or the abbreviation "L.L | |
| nter new principal offices address, if applicable: | 209 N Missouri Ave | |
| rincipal office address MUST BE A STREET ADDRESS) | Clearwater, FL 33755 | |
| | | |
| nter new mailing address, if applicable: | 209 N Missouri Ave | |
| failing address MAY BE A POST OF FICE BOX) | Clearwater, FL 33755 | |
| duting duaress MAT BE A POST OF FICE BOAT | | |
| | | |
| If amending the registered agent and/or registered office ent and/or the new registered office address here: Name of New Registered Agent: | address on our records, enter the name of the new | |
| ent and/or the new registered office address here: | | |
| ent and/or the new registered office address here: Name of New Registered Agent: | address on our records, enter the name of the new Enter Florida street address | |
| ent and/or the new registered office address here: Name of New Registered Agent: | | |

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

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added emoved from our records:

R = Manager BR = Authorized Member

| <u>e</u> | <u>Name</u> | Address 2020 JU; 1-5 Pri 6: 55 | Type of Action |
|--------------|------------------|--------------------------------|----------------|
| IBR | Joshua Rosenberg | 209 N Missouri Ave | = Add |
| | | Clearwater, FL 33755 | □Remove |
| | | | □Change |
| ивк ——— | Jordan Rosenberg | 209 N Missouri Ave | = Add |
| | | Clearwater, FL 33755 | □Remove |
| | | | □Change |
| MBR | Maxwell McEwan | 209 N Missouri Ave | = Add |
| | | Clearwater, FL 33755 | □Remove |
| | | | |
| MBR | John Bruno | 4570 Rutledge Drive | |
| | | Palm Harbor, FL 34685 | □Remove |
| | | | Change |
| | | | □Add |
| | | | □ Remove |
| | | | □Change |
| - | | | □Add |
| | | | □Remove |
| | | | □Change |

| | | 2020 JUH - 5 P | H C. == | |
|--|--|---|---|----------------------------------|
| | | | '' 6' 55 | . |
| | | | · | |
| | | | | |
| | | | | _ |
| | | | | |
| | | | | ,_ |
| | | | | |
| | | - | - | |
| | | | | _ <u>_</u> |
| | | | | |
| | | | | |
| | - | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| ctive date, if other than the date effective date is listed, the date must be e: If the date inserted in this block iment's effective date on the Depa | specific and cannot be prior to does not meet the applica | o date of filing or more tha ble statutory filing requ | (optional) n 90 days after filing.) Pursuant i irements, this date will not b | to 605.0207 (3 e listed as th |
| ord specifies a delayed effective da filed. | ite, but not an effective tin | ne, at 12:01 a.m. on the | earlier of: (b) The 90th day | after the |
| June 6 | 2020 | | | |
| | Mh - 1 | 1/h - | | |
| | | // · / / | | |