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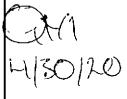
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

JLH OF FLO	ORIDA LLC	•	-
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	JOSE LUIS HERNANDE.	Z	
		Name of Person	<del></del>
	JLH OF FLORIDA LLC		
	<del></del> .	Firm/Company	
	808 NW 116th Street		
	•••	Address	
	Miami, FL 33168		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	luiztavhr@gmail.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information co	ncerning this matter, please c	all:	
Geoffrey Riley		561 932-8928 at ()	
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	e 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 Se		Street Address: Registration Se	ection
Division of Co	•	Division of Co	rporations
P.O. Box 6327 Tallahassee, F		The Centre of 2415 N. Monro	Fallahassee oc Street Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JLH OF FLORIDA 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 03/18/2019 and assigned Florida document number 1.19000076085 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 "LLC." 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: Geoffrey Riley Name of New Registered Agent: 2531 NW 72nd Ave Ste A 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

Miami

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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			□Remove
			□ Change
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effective date is listed, the date must le: If the date inserted in this block				
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April 12th.	2020			
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Filing Fee: \$25.00