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COVER LETTER

TO: Registration S Division of Co				
SUBJECT: JS	2 Pics of Real	ity 11(,		
SORTECT:	Name of Lin	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Jean	Name of Person		
		Firm/Company		2021 /
	3008	Gordon Ct Address		2021 APR 21
	Tam	Pa F1 33619 City/State and Zip Code	7. (c) 1717 (d) 1717 (d)	PH : 2
		City/State and Zip Code		: 23
or further information of	e-mail address: (concerning this matter, please c		fication)	
<u>Jeanea</u>	2eed of Person	at (<u>813</u>) <u>900 - 6 0</u> Area Code Daytim	ооЦ e Telephone Number	_
inclosed is a check for t	_			
□ \$25.00 Filing Fee	✓ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of Si Certified Copy (additional copy is	tatus &
<u>Mailing Addres</u> Registration 1		Street Address: Registration Sec	ction	
Division of C	Corporations	Division of Corp	porations	
P.O. Box 632 Tallahassee, 1		The Centre of T 2415 N. Monroe	allahassee e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>USP Pics a</u>	r Deaut-1	LLC		<u>-</u>		
(Name of the Limited	Liability Compar Florida Limited I.	ny as it now appe iability Company	ars on our recor }	<u>ds.</u>)		
The Articles of Organization for this Limited Liab	ility Company	were filed on _	4/1/2021	<u> </u>	and assigne	ed.
Florida document number						
This amendment is submitted to amend the follow	ing:					
A. If amending name, enter the new name of th	ne limited liabi	lity company l	<u>iere</u> :			
Jeanea Reed Photogra	aphy L	LC				
The new name must be distinguishable and contain the work	ls "Limited Liabili	ity Company," the	designation "LLC	2" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicab	le:	<u>Jeane</u>	a Reed	_010	202	
(Principal office address MUST BE A STREET)	ADDRESS)	_1971	W. Lum	sden	18 9 m H	<u>- 1</u> 28
		Bran	don F	1,335	5 <u>76</u> 1	
Enter new mailing address, if applicable:	N.O.		Same	ر د کانه	a it	
(Mailing address MAY BE A POST OFFICE BO	<u>/A)</u>			;	<u>N</u>	
B. If amending the registered agent and/or regi agent and/or the new registered office address b		ddress on our	records, enter	the name	of the new re	zistered
Name of New Registered Agent:						
New Registered Office Address:	1971 N	J. Lumsold Enter Flo	en Ed. = orida street addres	# 128	<u>-</u> .	_
-	Bran	HON City	FI	orida	33511 Zin Code	
		CIB			AO COAL	

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 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
			Remove
			□Change
			□Add
			Remove
			22 D Add
			□Change
			□Remove
			□Change
		····	□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□ Change