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	Division of Co	rporations	
	Fax Number	: (850)617-6383	2019
From:			
	Account Name	: BAND LAW GROUP, PL.	
	Account Number	: 12009 0000020	
	Phone	: (941)917-0505	
	Fax Number	: (941)917-0506	
••Ent		ress for this business entity to be used for	
	annual cenort m	silings. Enter only one email address please	, ¥•

JSI AUTO	·
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(FAX)941 917 0506

05/28/2019 14:28 Nicole Vasiljev

(((H19000170494 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JSI AUTO, 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 04/04/2019 and assigned Florida document number 119000090635

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 abbreviat	ion "L.	L.C."
Enter new principal offices address, if applicable:		610	
(Principal office address MUST BE A STREET ADDRESS)		ľ i	رع(
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			-80°
Enter new mailing address, if applicable:	<u>.</u>		<u> </u>
(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:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida 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

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Page 1

05/28/2019 14:28 Nicole Vasiljev (FAX)941 917 0506 P.003/004 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

Title	<u>Name</u> TREY DESENBERG	<u>Address</u> P.O. BOX 339	Type of Action
MGR		SARASOTA, FL 34230	Add
			Change
MGR	CONSTANCE PULEO	P.O. BOX 339 SARASOTA, FL 34230	🖬 Add
			C Remove
		<u> </u>	Change
MGR	DAVID WILSON	P.O. BOX 339 SARASOTA, FL 34230	□ Change
		••• ······	D'Remove -
			Change C
			Add
			Remove
			Change
			🖸 Add
			C Remove
			Change
		<u> </u>	🗖 Add
			C Remove
		<u> </u>	Change

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(FAX)941 917 0506

P.004/004

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _______(optional) (If 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 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated ____

2019

DO A

Signature of a member or authorized representative of a member

GREGORY S. BAND, AUTHORIZED REPRESENTATIVE

Typed or printed name of signase

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