L19000122220

(Req	uestor's Name)	
(Addi	ress)	
(Addı	ess)	
(City/	State/Zip/Phone	: #)
	—	—
PICK-UP	L WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Docu	ument Number)	-
Certified Copies	Certificates	of Status
Special Instructions to Fi	lina Officer:	
	.	





500420297075

12/15/23--01022--014 **25.00

COVER LETTER.

	ision of Cor					
SHD IECT.	EL KBRICHE PERFORMANCES LLC					
SUBJECT		Name of Lim	ited Liability Company			
The enclosed	J Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		ALEX LARACUENTE Q	UINTANA			
		Name of Person				
		EL KBRICHE PERFORM	ANCES LLC			
	Firm/Company					
		2715 BARCLAY LN				
			Address			
		KISSIMMEE FL 34743				
		-	City/State and Zip Code			
		LARACUENTE ALEX39@				
			to be used for future annual repo	rt notification)		
For further i	nformation c	oncerning this matter, please co	alf:			
ALEX L:ARACUENTE QUINTANA		407 403-34 at (.)	30			
	Name o	f Person	Area Code D	Paytime Telephone Number		
Enclosed is a	a check for th	ne following amount:				
□ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		<u>Street Addre</u> Registratio				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL KBRICHE PERFORMANCES 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 $^{05\text{-}06\text{-}2019}$ and assigned Florida document number L19000122220 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JC JOB COODINATOR LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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

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
MGR	IVAN MEJIAS	207 SCOTTSDALE SQ	■Add
		WINTER PARK FL 32792	⊟Remove
			□Change
			□ Add
			□Remove
			🖾 Change
			□Add
			□Remove
			□Add
			□Remove
			☐Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: DECEMBER 08-2023 (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) Note: 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 ___ DECEMBER 08 Signature of member or authorized representative of a member ALEX LARACUENTE Typed or printed name of signee

Filing Fee: \$25.00