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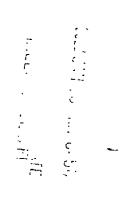
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A. BUTLER JAN 14 2022

COVER LETTER

TO: Registration S Division of Co	ection rporations		
JEMAJUIS SUBJECT:	SLLC		
30B0EC1.	Name of Lin	mited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
	ondence concerning this matte	-	
	TAD GROUND		
		Name of Person	
	NUGENT & GROUND,	LLC	
		Firm/Company	
	2455 E. SUNRISE BLVD	D., SUITE 807	
		Address	
	FORT LAUDERDALE, F	FL 33304	
		City/State and Zip Code	
	TAD@NGLAWFL.COM		
For further information c	E-mail address: (oncerning this matter, please c	(to be used for future annual report noti	fication)
TAD GROUND		954 537-1717	
Name of	Person	at () Arca Code Daytim	e Telephone Number
Enclosed is a check for th	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 S Division of Co P.O. Box 632 Tallahassee, F	ection orporations	Street Address: Registration Sec Division of Cor The Centre of T	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JEMAJUIS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 1. The Articles of Organization for this Limited Liability Company were filed on MAY 21, 2019 and assigned Florida document number L19000136674 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 "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

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

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
AP	TAD GROUND	2455 E. SUNRISE BLVD	
		SUITE 807	≣Remove
		FORT LAUDERDALE, FL 33304	🗆 Change
			□Add
			□Remove
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Effective date, if other the fan effective date is listed, the Note: If the date inserted in locument's effective date o	n nns ninck ancs lint	inect the applicat	o date of filing or more ole statutory filing re	(option than 90 days after fil equirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
record specifies a delayed is filed.	effective date, but no	ot an effective tim	e, at 12:01 a.m. on t	the earlier of: (b)	The 90th day after the
		2021			
atedDECEMBER 31		-,	- ·		
pated DECEMBER 31	Signature of a	Plata	ved tenresentative of	mambar	
DECEMBER 31 MITZU PLATA	`	Plata	zed representative of a	a member	

Filing Fee: \$25.00