49000196175

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	inications LLC		
OBJEC1	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	_	
lease return all correspo	ondence concerning this matter	to the following:	
	John Holmes		
		Name of Person	
	JH Communications LLC		
		Firm/Company	
	21 Sea Shark Path		
		Address	
	Palm Coast FL. 32164		
		City/State and Zip Code	
	neiseejane@gmail.com		
	E-mail address: (to be used for future annual report notif	leation)
or further information of	concerning this matter, please co	gH;	
Denise Holmes		352 304-3503 at ()	
Name o	ri Person	Area Code Daytime	: Telephone Number
inclosed is a check for t	he following amount:		
il \$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 enclose

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JH Communications 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 8/01/2019 The Articles of Organization for this Limited Liability Company were filed on 8/01/2019 Florida document number L19000196175 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: Name of New Registered Agent: New Registered Office 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 bring 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.

Enter Florida street address

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>	<u>Address</u>	Type of Action
MGR	John Holmes	21 Sea Shark Path Palm Coast, FL, 32164	■ Add
			Remove
			☐ Change
			Add
			Remove
			□ Change
			Add
			☐ Remove
			□ Change
			Remove
			□ Change
			☐ Remove
			Change
			□ Add
			Remove
			Change

	
	
	8/14/2019
fective date, if other than the	date of filing:(optional) st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207
o te: If the date inserted in this blo	ock does not meet the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the Do	epartment of State's records.
record specifies a delayed	d effective date, but not an effective time, at 12:01 a.m. on the earlier of
The 90th day after the reco	ord is filed.
August 14	2019
ited	Signature of a member or authorized representative of a member

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Typed or printed name of signee

Filing Fee: \$25.00