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COVER LETTER

TO: Registration So Division of Cor			
Juiced Digi	tal Solutions LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Juan Laguado		
		Name of Person	
		Firm/Company	
	10120 SW 37th st	TimeCompany	
		Address	
	Miami/FL 33165		
		City/State and Zip Code	
	jambsalesmiami@gmail.co		
For further information of	e-mail address: i concerning this matter, please c	to be used for future annual report no all:	ntication)
Juan Laguado		786 7924001	
Name o	of Person	at () Area Code Daytii	me Telephone Number
Enclosed is a check for t	he 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 Addres Registration	_	Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
Registration	Section Torporations 27	Registration S Division of Co The Centre of	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Juiced Digital Solutions LLC			,		
(<u>Name of the Limi</u> The Articles of Organization for this Limited L Florida document number L19000219645	AA Florids Limited	any as it now appears on Liability Company)	7.17.7 000	1 F.: IC: 20	
The Articles of Organization for this Limited L	iability Company	v were filed on $\frac{08/28/2}{2}$	2019	and assigned	
Florida document number L19000219645			₩.L.	13.5	
This amendment is submitted to amend the following	lowing:				
A. If amending name, <u>enter the new name o</u>	of the limited lial	bility company here:			
he new name must be distinguishable and contain the	words "Limited Liab	ility Company." the design	nation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applic	Enter new principal offices address, if applicable:		10120 SW 37th ST Miami FL, 33165		
Principal office address MUST BE A STREI	<u>ET ADDRESS)</u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	10120 SW 37th ST	Miami FL, 33165		
B. If amending the registered agent and/or agent and/or the new registered office addre	***	address on our reco	rds, <u>enter the n</u> a	ame of the new regist	
Name of New Registered Agent:					
New Registered Office Address:	10120 SW 371				
		Enter Florida .			
	Miami		Florida	33165	
		City		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 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
AMBR	Ariel Garcia JR	16480 SW 47th TERR Miami FL 33185	□ Add
			≣Remove
			🗀 Change
			🗆 Add
			□ Remove
			□Change
			□ Add
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Effective date, if other than the liften effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ie date of filing: _ nust be specific and can block does not meet	the applicable	ate of filing or more th	optional (optional nan 90 days after filing uirements, this dat	g.) Pursuant to 605.020
ne record specifies a delayed effect ord is filed.	ive date, but not an	effective time.	at 12:01 a.m. on th	e earlier of: (b) T	he 90th day after the
Dated October 6	. <u> </u>				
	Signature of a men	ther or authorize	d representative of a	member	
		iciet vii dadaminiti			

Typed or printed name of signee