

LI 9000 231824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

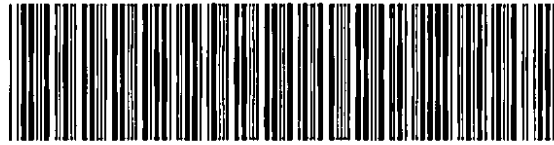
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STATE BAR OF FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

R. HUNT

11/01/23

**FLORIDA FILING & SEARCH SERVICES, INC.**

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**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 11/1/23**

**NAME: JTREE CONSULTING LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 25.00**

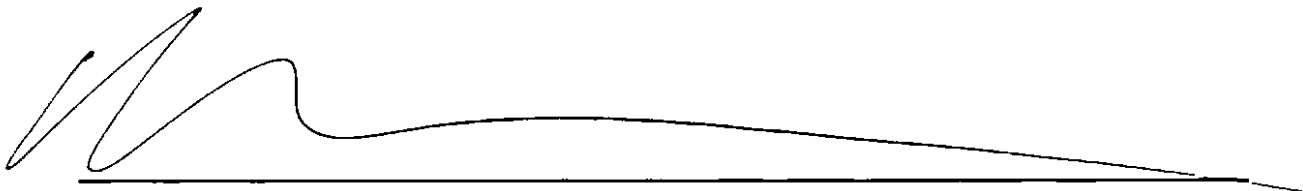
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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JTREE CONSULTING LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY KOGAN

Name of Person

ACTONY INC

Firm/Company

2424 N FEDERAL HWY SUITE 411

Address

BOCA RATON, FL 33431

City/State and Zip Code

INFO@ASGTAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY KOGAN

561

843-0219

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

11:50 AM  
DIVISION OF CORPORATIONS  
2023 NOV - 1 PM 12:40

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

JTREE CONSULTING 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 09/13/2019 and assigned  
Florida document number L19000231824.

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)

9121 PARAGON WAY

BOYNTON BEACH, FL 33472

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9121 PARAGON WAY

BOYNTON BEACH, FL 33472

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DIVISION OF CORPORATIONS  
2023 NOV - 1 PM 12:40

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:

9121 PARAGON WAY

*Enter Florida street address*

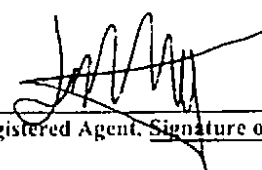
BOYNTON BEACH, Florida 33472

*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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	VEAL, JOSH	9121 PARAGON WAY	<input type="checkbox"/> Add
		BOYNTON BEACH, FL 33472	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MARKS, JOSHUA	9121 PARAGON WAY	<input type="checkbox"/> Add
		BOYNTON BEACH, FL 33472	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

2023 NOV - 3 PM 1:40  
DIVISION OF STATE  
SECRETARY OF STATE  
DIVISION OF CONFIDENTIALITY

