## L19000 249 156

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## COVER LETTER

TO: Registration Se Division of Cor				
JSC REAL	ESTATE, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Sue Schnabel, Paralegal			
		Name of Person		
	Bret Jones, P.A.			
		Firm/Company		
	700 Almond Street			
		Add: css	•	
	Clermont, FL 34711			
		City/State and Zip Code		
	sschnabel@bretjonespa.com	n to be used for future annual report notificati	ion)	1
For further information c	oncerning this matter, please ca			
Sue Schnabel	, i	352 394-4025		
Name o	f Person	at () Area Code Daytime Te	lephone Number	~
Enclosed is a check for the	he following amount:			i
■ \$25.00 Filing Fee	(1) \$30,00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	© \$60.00 Filing Certificate of Certified Contact (additional cop	g ree, of Status & opy
<u>Mailing Addres</u> Registration S		Street Address: Registration Section	ın	
Division of C	Corporations	Division of Corpor	ations	
P.O. Box 632	27	The Centre of Talla	anassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JSC REAL ESTATE, LLC					_	
(Name of the Limi	ed Liability Compa (A Florida Limited	ny as it now appears on our re Liability Company)	ecords.)			
The Articles of Organization for this Limited L Florida document number L19000249156	iability Company	were filed on October 3, 20	019	and a	issigned	
his amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here:				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	"LLC" or the abbre	viation '	"L L.C."	_
Enter new principal offices address, if applic		8010 US Highway 441			_	
Principal office address MUST BE A STREE		Leesburg, FL 34788				_
			<del></del>		i	****
Enter new mailing address, if applicable:		8010 US Highway 441			٠ :	
(Mailing address MAY BE A POST OFFICE BOX)		Leesburg, FL 34788			<u>.</u> .	_
			<u> </u>		÷- 2	<del>-</del>
B. If amending the registered agent and/or i		address on our records, <u>e</u>	nter the name	of the n	ew regis	<u>ter</u> (
gent and/or the new registered office addre	ss here:			r (	(. [·	
Name of New Registered Agent:						
New Registered Office Address:	8010 US High					
		Enter Florida street u	ddress			
	Leesburg		_, Florida <u>3478</u>	8		
		City		Zip Coo	le	

## 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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			[ ] Add
			Remove
			□Change
			:
			□Remove
			!
			🗆 Add
			[]Remove
			□Change
			□Add
			□Remove
		110,000	[]Change
			🗀 Add
			🗆 Remove
			□Change

	<u></u> }
	<del></del>
ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of filling	ing or more than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable statutor ocument's effective date on the Department of State's records.	ry thing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effective time, at 12:01 is filed.	1 a.m. on the earlier of: (b) The 90th day after the
ated April 6 2023	
ated ·	

Filing Fee: \$25.00

Typed or printed name of signee