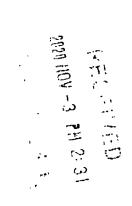
119000279495

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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2020 NOV -3 AM \$430

T I I I

NOV () ; 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/03/2020		**WALK IN**
ENTITY NAME JACKS	ON HOLDINGS LLC	
ENTITI WALIL		
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETUR	V
XXXX	Plain Copy	
	Certified Copy	
	Certificate of Status	
***	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE	ENTITY**
	Certified Copy of Arts & Amendments	
	TY NAME IJACKSON HOLDINGS LLC UMENT NUMBER **PLEASE FILE THE ATTACHED AND RETURN** X Plain Copy Certified Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing **APOSTILLE' / NOTARIAL CERTIFICATION** VIRY OF DESTINATION BER OF CERTIFICATES REQUESTED	
	APOSTILLE' / NOTARIAL CERTIFICATIO	DN
COUNTRY OF DESTINATI	YON	
TOTAL OWED \$25.00	ACCOUNT #	: 120160000072
		6 6 g
Please call Tina at th	e above number for any issues or concerns.	Thank you so much!

COVER LETTER

	egistration Se vision of Cor			
aun iraw	Backson Ho	_		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub.	mitted for filing	
		ndence concerning this matter		
		Megan Fuentes		
			Name of Person	
		ZenBusiness PBC		
			Firm/Company	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		5900 Balcones Dr. Suite 50	000	
			Address	
		Austin, Texas, 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		
For further	information c	E-mail address: (oncerning this matter, please of	to be used for future annual re	port notification)
Megan Fue		time that the transfer of		6249
	<u>-</u> -	f Person	at () Area Code	Daytime Telephone Number
				. ,
Enclosed is	s a check for th	he following amount:		
■ \$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	lailing Addres		<u>Street Ado</u> Registrat	I <u>ress:</u> ion Section
D	ivision of C	Corporations	Division	of Corporations
	.O. Box 632 allahassee, l			tre of Tallahassee Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hackson Holdings LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) .iability Company)
The Articles of Organization for this Limited Liability Company Horida document number <u>L19000279495</u> .	were filed on 11/08/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5913 Buttonwood Square
(Principal office address MUST BE A STREET ADDRESS)	Vero Beach, FL 32966
Enter new mailing address, if applicable:	5913 Buttonwood Square
(Mailing address MAY BE A POST OFFICE BOX)	Vero Beach, FL 32966
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registers
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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>	Name	Address	Type of Action
AMBR	Ian Jackson	5913 Buttonwood Square	
		Vero Beach, FL 32966	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
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ective date, if other than the d effective date is listed, the date must be te: If the date inserted in this bloc nument's effective date on the Dep	e specific and cannot be prick does not meet the appli	r to date of filing or m cable statutory filin	ore than 90 days after ti	ling.) Pursuant to 605.0201
cord specifies a delayed effective (s filed.	late, but not an effective	iime, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
ed November 2	2020	·		
/s/ lan Jackson				
	gnature of a member or aut	norized representative	of a member	-
3	grature of a member of date		or a memoer	

Filing Fee: \$25.00