Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000373692 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210

Phone Fax Number

: (561)746-1002 : (561)775-0270

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: JANET@PROTOCOLHS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PJCD HOLDING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

O SIMMONS

OCT 28 2020

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT +

(((H20000373692 3)))

ARTICLES OF ORGANIZATION 227 KM 9: 33

	LDING, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now annear Liability Company)	s on que records.)	
The Articles of Organization for this Limited Liability Company	were filed on	12/27/2019	and assigned
Florida document numberL20000005814			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited link	pility company he	<u>re</u> ;	
Puwerphase International, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8985 SE Bridge Rd.		
Principal office address MUST BE A STREET ADDRESS	Hobe Sound, FL	33455	
Enter new mailing address, if applicable:	8985 SE Bridge	Rd.	
Mailing address MAY BE A POST OFFICE BOX)	Hobe Sound, FL	33455	
3. If amending the registered agent and/or registered office	address on our re	cords, enter the na	
gent and/or the new registered office address here:			
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent: New Registered Office Address:			
	Enter Flori	da street address	
	Enter Flori City	da street address, Florida	Zip Code

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:	v · -	
	(((H20000373692 3)))	

MGR = Manager AMBR = Authorized Member 2020 00: 27 67 9: 33

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeck, Harris, Raynor & Jones, P.A.	790 Juno Ocean Walk	□Add
		Juno Beach, FL 33408	■ Remove
		Wrong .	□ Change
MGR Robert Kraft	8985 SE Bridge Rd.	≡∧dd	
	Hobe Sound, FL 33455	Remove	
			Change
			∐Add
		□Remove	
		□Change	
		<u></u>	□Add
			□Remove
		□ Add	
			☐ Remove
			☐ Change
		□Add	
		.	□Removc
			Change

(((H20000373692 3)))

	other information, enter change(s) here: (Attach additional sheets, if necessary.) 9: 33
	-
	
•	
	
<u>te:</u> If the date in	other than the date of filing:
cord specifies a c s filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	October 27, 2020
	They per
	Signature of a member or authorized representative of a member
	Philippe Jeck, President of Jeck, Harris, Raynor & Jones

(((H200003736923)))

Filing Fee: \$25.00