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SECRETARY OF STATE DIVERSION OF OCCUPACEALING

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC	Life in Jay	Pizza LLC		
SUBJEC		Name of Lin	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Crystal Rutherford		
			Name of Person	
			Firm/Company	
		6355 Hall Rd		
			Address	
		Jay, FL 32565		
		lifeinjay850@gmail.com	City/State and Zip Code	
For furth	ner information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no	tification)
		oncerning and matter, piease e	uii.	
Crystal I	Rutherford		850 982-8964 at ()	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed	I is a check for th	ne 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 S		Street Address: Registration Se	ection
	Division of C	Commonwealth and	Division of Co	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Life in Jay Pizza 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 $\frac{01/02/2020}{1}$ ____ and assigned Florida document number 1.20000008380 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Life in Jay LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address _. Florida <u>__</u> City

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>	Address	Type of Action
		 	□Add
		<u>.</u>	□Remove
			☐ Change
			□ Add
			□Remove
			□Change
	 		
			□Remove
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			□Remove
			□Change
			□Remove
			□Remove
			□ Change

Just want to change the nan	me FROM Life in Jay Pizza LLC TO Life in Jay LLC	
-		
		
		
ctive date, if other than th	he date of filing:(optional)	
effective date is listed, the date m	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 block does not meet the applicable statutory filing requirements, this date will not be listed	207 (3)(b)
	Department of State's records.	as me
ord specifies a delayed effect filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after t	he
med.		
d January 16	2020	
		
Car	1/1-10 wthouland	
	Signature of a member of authorized representative of a member	

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