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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO:

Registration Section

Divisi	on of Cor	porations						
CHARLES AND AND		JPHOLSTERY LLC						
SUBJECT: _		Name of Lin	nited Liability Company					
The analysed A	utinlas of	Amendment and fee(s) are sub	mitted for files					
			· ·					
Please return al	l correspo	ndence concerning this matter	to the following:					
		JOSE D LOPEZ RUBIER	A					
			Name of Person					
			Firm/Company					
			Address					
		LAKE WORTH, FL. 3346	i					
		MINERVA1767@GMAIL.	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·				
			to be used for future annual report i	potification)				
For further info	rmation ce	oncerning this matter, please c	·					
JOSE D LOPE			561 598-3850					
	Name of	Person	Area Code Day	time Telephone Number				
Enclosed is a cl	neck for th	e following amount:						
■ \$25.00 Fili	ng 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)				
	g Address tration S		Street Address: Registration					
_		orporations	Registration Section Division of Corporations					
	Box 632		The Centre o					
Tallal	hassee, F	L 32314	2415 N. Mon	roe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

JODALO UPHOLSTERY 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 ________ Florida document number L20000040825 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." 1821 7TH AVENUE N UNIT A8 Enter new principal offices address, if applicable: LAKE WORTH, FL, 33461 (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: MINERVA A MENA Name of New Registered Agent: 1821 7TH AVENUE N UNIT A8 New Registered Office Address: Enter Florida street address ____. Florida 33461 Zip Code LAKE WORTH

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>	Type of Action
MGR	MINERVA A MENA	1821 7TH AVENUE N UNIT A8	≅ Add
		LAKE WORTH, FL. 33461	
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