L20000043027

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

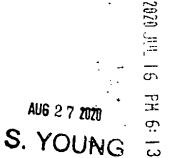
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COVER LETTER

TO:

TO: Registration So Division of Co					
	TEAM, LLC	·			
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ERIC O. HOWELL				
		Name of Person			
	Howell CPA Group				
		Firm/Company			
	408 W. Baldwin Rd				
		Address			
	Panama City, FL 32405				
		City/State and Zip Code	 		
	admin@howellcpagroup.co				
For further information c	ncerning this matter, please c	to be used for future annual report nall:	otification)		
Eric Howell		850 215-3093			
Name o	f Person	Area Code Days	ime Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:			
Registration Section Division of Corporations		-	Registration Section Division of Corporations		
P.O. Box 632	.7	The Centre of Tallahassee			
Tallahassee, 1	FL 32314	2415 N. Mon	roe Street, Suite 810		

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Rush Team, 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 $\stackrel{02/05/2020}{-}$ Florida document number L20000043027 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Jessica Rush, 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

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.

City

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
MGR	Jason Rush	877 W. Minneola Ave #120391	□Add
		Clermont, FL 34712	= Remove
			Change
			□Add
			□Remove
			□Change
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fective date	, if other than the date	e of filing:		(optio	nal)
an effective date ote: If the da	e is listed, the date must be s	pecific and cannot be ploces not meet the ap	prior to date of filing or a plicable statutory fili	more than 90 days after (iling.) Pursuant to 605.0207 date will not be listed as
record specition is filed.	es a delayed effective dat	e, but not an effectiv	ve time, at 12:01 a.m	. on the earlier of: (b)	The 90th day after the
ated	July 8,	2020			
	-	——· ; — — /			

Typed or printed name of signee