

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800342778328

04/02/20--01004--019 **25.00

SECRETARY OF STATE FALLAHASSEE, FLORING

APR 1 4 2020

COVER LETTER

Registration Section Division of Corporations

TO:

JGreen So	olutions LLC		
30BJEC1	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	enclosed Articles of Amendment and (ec(s) are submitted for filting. se return all correspondence concerning this matter to the following: Kevin Green		
	Kevin Green		
		Name of Person	
	Jgreen Solutions LLC/ T	eamont Boba	
		Firm/Company	
	136 colonial pine lane		
		Address	
	Minneola/ FL 34715		
		City/State and Zip Code	
	= =		
		•	lication)
For further information of	oncerning this matter, please c	all:	
Kevin A. Green			
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration S	Section Torporations 7	Registration Se Division of Cor The Centre of T	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JGreen Solutions LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>)</u>
The Articles of Organization for this Limited Liability Company Florida document number L20000047558	were filed on 2/10/2020	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	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		500
(Principal office address MUST BE A STREET ADDRESS)		AT 12 A
		APR AHAS
Enter new mailing address, if applicable:		-2 1 SSEE
(Mailing address MAY BE A POST OFFICE BOX)		
Maning undress MAT BE A TOST OFFICE BOAT		0 A
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, <u>enter t</u>	he name of the new register
New Registered Office Address:	Enter Florida street address	
	Flo	rida
	City	rida
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agroup provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and	d I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	Address	Type of Action
MGR	Juliana Green	136 Colonial Pine Lane - Minneola FL 34715	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		ELAHASSIE,	A Add
		E. S. S. A. T. C. S. T. T. S. T. C. S. T. S. T. C. S. T. S. T. C. S. T. C. S. T. C. S. T. C. S. T. S.	Remove
			□Remove
			□Change
			□Add
			□Remove
			Change

Page 2 of 3

		•	
-			
-			
-		<u> </u>	
-			
-			
-			
_		TSEC	63 73
-		AHA NEU	APR J
-		3388 0 338	
-		FLOR	
_		- <u>24</u> 5m	26
-			
		<u>-</u> -	
			
-		.	
(If an effe	ve date, if other than the date of filing: (option ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filf the date inserted in this block does not meet the applicable statutory filing requirements, this ent's effective date on the Department of State's records.	iling.) Pursuar	
docume		m on the	earlier o
the rec	ard specifies a delayed effective date, but not an effective time, at $12:01$ a. 90th day after the record is filed.	m. on the	
the rec) The	90th day after the record is filed.	m. on the	
the rec) The			

Page 3 of 3

Filing Fee: \$25.00