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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
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COVER LETTER

		istration Sedision of Corp		e e	£
		Jabb Holdin	ngs LLC	·	
SUBJEC	. I :		Name of Lim	ited Liability Company	
The encl	osed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn	all correspo	ndence concerning this matter	to the following:	
			Allen Paxton		
	Name of Person				
				Firm/Company	<u>-</u>
		1401 Lawrence Street, Suite 1900			
				Address	
			Denver, CO 80202		
				City/State and Zip Code	·
			allen.paxton@gmlaw.com	to be used for future annual repo	vi natification)
For furth	ier ir	nformation co	oncerning this matter, please co		(Chotheadon)
Allen Pa	axtoi	1		303 665-08	60
		Name of	f Person	at () Area Code Γ	aytime Telephone Number
Enclosed	l is a	check for th	ne following amount:		
■ \$25.	00 F	iling 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)
		ling Address		Street Addre	
Registration Section Division of Corporations		Registratio Division of	n Section Corporations		
). Box 632			of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jabb Holdings LLC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.20000047921	were filed on 02/11/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
Jeffster, LLC	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	78. S.
- 	
	A A
Enter new mailing address, if applicable:	30 SSE
•••	77
Mailing address MAY BE A POST OFFICE BOX)	
	, –
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, enter the name of the new reg
Non-Paristand Office Address	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further agree to comply w

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
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			☐Change
			Change Remove
			SS D Change
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	be specific and cannot be prior to date of			
te: It the date inserted in this blo cument's effective date on the De	ck does not meet the applicable stati partment of State's records.	utory tiling requirements, this date	will not be fiste	o a
cord specifies a delayed effective s filed.	date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) Th	e 90th day after	the
ted March 27	2020			
	Alpr.) E=			
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Filing Fee: \$25.00