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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAJL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J. HORNE FEB ⁻ 5 2022	

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SECRETARY OF STA

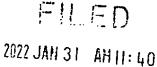
COVER LETTER

· TO:

TO:				
CHD IE		rketing, LLC		
SUBJEC	JI:	Name of Lin	nited Liability Company	
The encl	Division of Corporations Beach Marketing, LLC Name of Limited Liability Company			
		Jessica Lemer		
			Name of Person	
		Jess Lerner Photography		
			Firm/Company	
		140 Summit Drive		
			Address	
		Pismo Beach, California 9	93449	
			City/State and Zip Code	
		=		
		E-mail address:	to be used for future annual report not	ification)
For furth	er information	concerning this matter, please c	all:	
Jessica L	ærner			
	Name (of Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for t	the following amount:		
□ \$ 25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
				ection
	P.O. Box 632	27	The Centre of	Γallahassee
	Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Beach Marketing, LLC

(Name of the Limited Liability Company as it now appears on our records.)

SECRETARY OF STATE

(A riono	a Limited	Liability Company)		
The Articles of Organization for this Limited Liability (Company	were filed on June 23, 2020	and assigned	
Florida document number L20000175002	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liab	oility company here:		
Jess Lerner, LLC				
The new name must be distinguishable and contain the words "Lir	nited Liab	ility Company," the designation "	'LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		140 Summit Drive		
(Principal office address MUST BE A STREET ADDRESS)		Pismo Beach, California 93449		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office	address on our records, <u>er</u>	nter the name of the new register	
Name of New Registered Agent: Jessie	a Lemer			
New Registered Office Address: 1331	Coggin A			
		Enter Florida street ac	ldress	
Chipl	ey		, Florida <u>32428</u>	
		City	Zip Code	

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
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
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ffective date, if other than the an effective date is listed, the date interest in this occurrent's effective date on the	must be specific block does n	e and cannot be p not meet the ap	plicable statutory	e or more than 90	(optional) days after filing.) P eents, this date wi	ursuant to 605.02 Il not be listed
record specifies a delayed effect is filed.	tive date, but	not an effectiv	ve time, at 12:01	a.m. on the earl	ier of: (b) The 9	Oth day after th
January 24		,	·			
\sim	_ ^	·				
	Signature,	of a member or a	uthorized represen	tative of a memb	er	

Filing Fee: \$25.00