## k2c CCC 162673

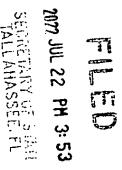
(Requestor's Name)
(Address)
(Address)
(101000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodine in Tromber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_

Office Use Only



400391335544

07/22/22--01019--009 \*\*25.30



## **COVER LETTER**

TO: Registration So Division of Cor			
JCLOUGH	1305 LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Karen Clough		
		Name of Person	
	JCLOUGH305LLC		
		Firm/Company	
	11965 NW 12th Street		
		Address	<del></del>
	Pembroke Pines, FL 33026	'n	
		City/State and Zip Code	
	Jclough305@gmail.com E-mail address: (	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please c		,
Karen Clough		305 469-6137	
Name c	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Sec	tion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

JCLOUGH305 LLC

company has been notified in writing of this change.

2022 JUL 22 PH 3: 54

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on c Liability Company)	TALLAHASSEE, FL	
		<del>-</del>	
The Articles of Organization for this Limited Liability Company	were filed on despread	and assigned	
Florida document number L20000182873		•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
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 record	ls, enter the name of the new register	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	. Florida		
**************************************	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and ag	ree to act in this capa	city I further agree to comply with t	
provisions of all statutes relative to the proper and complete			

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

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 P. Clough	11965 NW 12th Street	■Add
		Pembroke Pines, FL 33026	□Remove
			□ Change
MGR	Karen Clough	11965 NW 12th Street	□ Add
		Pembroke Pines, FL 33026	□Remove
		<del></del>	☐ Change
	<del></del>		□Add
			☐ Change
			□Add
			Remove
			Change
			□ Add
		<del></del>	□Remove
			Change
			□Add
			□Remove
			□Change

7		•				
					<del></del>	
	<u></u>					_
· · · · · · · · · · · · · · · · · · ·						_
						_
<del></del>	<u> </u>	<del>-</del>	<u>-</u>			_
			<u>.</u>			_
	<u> </u>	· · · · · · · · · · · · · · · · · · ·				_
						_
		-,		· · · · · · · · · · · · · · · · · · ·		_
				<b>₹</b> 5	7022	_
					<u></u> _	<u>-</u>
				AH.	2	_
				ASSEL VSSEL	₹.	
				ロッ 四 <u>変</u>	ယ္ 	C
				<u>ਦ</u> ਾਣ	<b>F</b>	
ective date, if other than the date of filing:			(	optional)		
effective date is listed, the date must be specific and cannot be pricted. If the date inserted in this block does not meet the appl	licable stat					
rument's effective date on the Department of State's record	ds.					
cord specifies a delayed effective date, but not an effective	e time, at 12	2:01 a.m. on	the earlier o	f: (b) The 90	th day a	fter th
s filed.						
18th July 2022						
	<u> </u>					
	/					