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## **COVER LETTER**

TO:	Registration Sec Division of Corp				
		Bicycles, LLC			
SUBJE	CT:	Name of Limi	ited Liability Company	- <u>-</u>	
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		John Sanders Jr.			
			Name of Person		
		JRS Custom Bicycles, LLC			
			Firm/Company		
		1066 SW Dartmouth ave.			
			Address	<del></del>	
		Port Saint Lucie, Fl 34953			
	City/State and Zip Code				
		jrscustombicycles@yahoo.c	om to be used for future annual report notifi	cation)	
For furtl	her information co	oncerning this matter, please ca		,	
John Sa	nders		305 3940014 at ()		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclose	d is a check for th	c following amount:			
■ \$25	.00 Filing 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)	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JRS Custom Bicycles, LLC

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $\frac{7/01/2020}{}$	and assigned
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	lity Company," the designation "LLC" or the al	obreviation "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)		<del></del>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	e of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		<u> </u>
	Enter Florida street address	:
<del></del>	, Florida	Zip Gode
New Registered Agent's Signature, if changing Registered Agent	·	
I hereby accept the appointment as registered agent and aging provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am provided for in Chapter 605, F.S. Or,	familiar with and if this document is
If Cha	nging Registered Agent, Signature of New Re	gistered 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	John Sanders Jr.	1066 SW Dartmouth Ave, Port Saint Lucie, FI 34953	3 <b>■</b> Add
			□Remove
			□ Change
MGR	Faith Sanders	1066 SW Dartmouth Ave, Port Saint Lucie FI 34953	🗃 Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
			_ □Change
			_ □Add
			_ □Remove
			Change

amending any other	r information, enter change(s) here: (Attach additional sheets, if necessary.)
Note: If the date inserte	er than the date of filing:  I, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ate on the Department of State's records.
record specifies a dela d is filed.	ayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Fahruary 22	2021
Dated February 22	11612 / 116
	Signature of a member or authorized representative of a member
Faith Sande	ers / John Sanders
	Typed or printed name of signee