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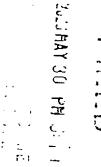
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: _ J	800s Unio	iersal Vendi	ng UL
<del></del>	Name of Lim	ited Liability Company	-
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
		Jonathan +	20binson
	J&Js Unil	Sal M. O. T. Sep	
	3800	INVERPARY =	Blud SHE 4083 DA 33319
	lud	WKII, FLORT	DA 33319
	E-mail address: (	agency egmail.	com  (fication)
For further information cor	ncerning this matter, please ca	all:	
Jonathan- Name of F	Abinson	ar( <u>12_1</u> )	S 1 8 1
Enclosed is a check for the	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)
<u>Mailing Address:</u> Registration Se Division of Co	ection	<u>Street Address:</u> Registration Se Division of Co	
P.O. Box 6327 Tallahassee, FI		The Centre of T	•

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ial Vending LLC
npany as it now appears on our records.) ed Liability Company)
any were filed on $\frac{7/09/2020}{}$ and assigned
ability company here:  1. D. T. Sevice C. ability Company," the designation "LLC" or the abbreviation "L.L.C."
3800 INUERRARY Blud Ste 408 Lauderhill FLorida 33319
TAY THE
ce address on our records, enter the name of the new registere
( i
Enter Florida street address
, Florida

## 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>	Address	Type of Action
AMBR	Justin Tyler McDowell	3800 Inverrary Byld Ste 408B	DAdd
		Laudechill, FL 33316	<u>1_</u> ⊟Remove
^		Ste.	Change
AMBR	11 Hany Donielle fairs	3800 Inversary Bud 4085	
		Laudethill, FL 33319	□Remove
			□Change
			□Add
			□Remove
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<del></del>			□ Add
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			□ Change
			□ Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□ Change

Effortivo	date, if other than the date of filing:(optional)
f an effecti	we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
Note: 11 ( document	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a 's effective date on the Department of State's records.
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
	May 18th 2008
Dated	May 18th 2028.  Signature of a prember or authorized representative of a member
	landha athings
	Signature of a member or authorized representative of a member
	Jonathan D. Probinson