L20000199363

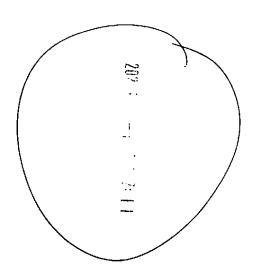
Office Use Only



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5. Roberts 7/18/23



COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT:	JSTORM	TACTICAL FL. LLC			
		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:			
		JASON STEIR			
		Name of Person			
	Firm/Company				
	4697 k	4697 ROSE CORAL DRIVE, APT3 Address			
	ORL	ANDO, FLORIDA 32808			
		City/State and Zip Code			
	E-mail address: (STEIR89@GMAIL.COM to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	·			
JASON STEIR		at (<u>954</u>) <u>594-6813</u>			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Sectin Section Section Section Section Section Section Section Section		
Mailing Address:		Street Address:	otion		
Registration Section		-	Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JSTORM TACTICA	L FL. LLC		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appea ability Company)	ars on our records.)	<u>-</u>
he Articles of Organization for this Limited Liability Company v	vere filed on _	7/10/2020	and assigned
lorida document numberL20000199263			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liabil	ity company h	<u>iere</u> :	
JSTORM PRO SERVICES, LLC			
he new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the	designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			207
			• • •
			,
nter new mailing address, if applicable:			· .
•••			: :
Mailing address MAY BE A POST OFFICE BOX)			
			-
. If amending the registered agent and/or registered office ad	idress on our	records, enter the	name of the new regis
gent and/or the new registered office address here:		, <u></u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	orida street address	
		Florid	a
	Cine		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>	Address	Type of Action
			\ \propto Add
			Remove
			Change
			□Add
			Remove
			□Change
			□ Add
			□ Remove
			□Remove
			Change
			□ Add
			□Remove
			Change
			🗆 Add
			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ______ (optional) (If an effective 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated APRIL 25^{TI}

Signature of a member or authorized representative of a member

JASON STEIR
Typed or printed name of signee