## L20000347354

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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## **COVER LETTER**

TO:

| TO: Registration<br>Division of C                                       |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
|   | ncipríses, LLC                                   |  |  |  |  |  |
| SUBJECT:  | VBJECT:  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| The enclosed Articles   | of Amendment and fee(s) are sub                  | omitted for filing.  |  |  |  |  |
| Hease return all corre  | spondence concerning this matter                 | to the following:  |  |  |  |  |
|   | Shaneice Pinnock                                 |  |  |  |  |  |
|   |  | Name of Person   | <u>.</u>   |  |  |  |
| ·   | J.S. 5 Enterprises, LLC                          |  |  |  |  |  |
|   | Firm Company                                     |  |  |  |  |  |
|   | 2010 North 61st Avenue                           |  |  |  |  |  |
|   |  | Address  |  |  |  |  |
|   | Hollywood, FL 33024                              |  |  |  |  |  |
|   |  | City/State and Zip Code  |  |  |  |  |
|   | js5.enterprises.flc@gmail.c<br>E-mail address: ( | om  to be used for future annual report noti   | fication)  |  |  |  |
| For further information   | n concerning this matter, please c               | all:   |  |  |  |  |
| Julio E. Victoria   |  | 980 267-5639   |  |  |  |  |
| Name of Person  |  | at {}} Area Code Daytim  | e Telephone Number   |  |  |  |
| Inclosed is a check fo  | r the following amount:                          |  |  |  |  |  |
| □ \$25,00 Filing Fee  | ☐ \$30.00 Filing Fee &<br>Certificate of Status  | S55.00 Filing Fee & Certified Copy (additional copy is enclosed)   | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed) |  |  |  |
| Mailing Add<br>Registration<br>Division of<br>P.O. Box 6<br>Tallahassee | n Section<br>Corporations<br>327                 | Street Address:<br>Registration Se<br>Division of Cor<br>The Centre of T<br>2415 N. Monro<br>Tallahassee, FL | porations<br>fallahassee<br>e Street, Suite 810  |  |  |  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| J.S. 5 Enterprises, LLC  |  |   |
|--|--|---|
| ( <u>Name of the Limited Liability Compan</u><br>(A Florida Limited Li   | y as it now appears on our records.)<br>ability Company) |   |
| The Articles of Organization for this Limited Liability Company velocida document number $\frac{L20000347354}{L20000347354}$ .     | were filed on November 2, 2020                           | and assigned  |
| This amendment is submitted to amend the following:  |  |   |
| A. If amending name, enter the new name of the limited liabil  | ity company here:  |   |
| he new name must be distinguishable and contain the words "Limited Liabili   | ty Company," the designation "LLC" or the                | abbreviation "L.L.C."   |
| Inter new principal offices address, if applicable:  | <u> </u>   | 22  |
| Principal office address MUST BE A STREET ADDRESS)   |  | 2021 F  |
|  |  | =   |
|  |  |   |
| Inter new mailing address, if applicable:  |  | 三王  |
| Mailing address MAY BE A POST OFFICE BOX)  |  | (0)<br>(0)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1 |
|  |  | 0,5   |
| <ol> <li>If amending the registered agent and/or registered office agent and/or the new registered office address here:</li> </ol> | ddress on our records, <u>enter the na</u>               | me of the new regist  |
| Name of New Registered Agent:  |  |   |
| New Registered Office Address:   |  |   |
|  | Enter Florida street address                             |   |
|  | , Florida _  |   |
|  | 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 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         | Julio E. Victoria | 3920 Mohawk Court   | □Add                            |
|              |                   | Charlotte, NC 28215 | □Remove                         |
| •            |                   | <del></del>         | □Change                         |
|              |                   |                     | □Add                            |
|              |                   |                     | □Remove                         |
|              |                   |                     | ☐ Change                        |
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|              |                   | <del></del>         | □Remove                         |
|              |                   |                     | □ Change                        |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) We would like to amend the Articles of Organization as follows: Please change the title of Julio E. Victoria from AMBR to MGR. 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 May 6 2021 Signature of a member or authorized representative of a member Julio E. Victoria Typed or printed name of signee

Filing Fee: \$25.00