## 12000364465

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phone #	)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Name)	
(Docur	ment Number)	<del></del>
Certified Copies	Certificates of	Status
Special Instructions to Fili	ng Officer:	
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06/28/24--01012--037 \*\*25.00

7/16/24 KH

## **COVER LETTER**

	Registration Se Division of Cor		ŕ	· 🙀	
<i></i>	JETI 8 LLC				
SUBJEC	T:	Name of Limi	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		ETI HANINA			
			Name of Person	<del></del>	
		JETI 8 LL).			
		<del>-,,-</del>	Firm/Company		
		5954 NW 65TH TERRAC	Е		
			Address		
		PARKLAND FL. 33067-1	567		
			City/State and Zip Code		
		ASITRISH@OUTLOOK.C	OM to be used for future annual report no	outtestion)	
For furth	ner information c	oncerning this matter, please of		Juneacion,	
ETI HA	NINA		954 954 226 1	458	
	Name o	f Person	Area Code Dayı	ime Telephone Number	
Enclosed	I is a check for th	ne following amount:			
<b>X</b> i \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of \$t Certified Copy (additional copy is o	atus & .
	Mailing Addres		Street Address:	Soution	
	Registration S Division of C		Registration S Division of C		
	P.O. Box 632	2.7	The Centre of		
	Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JETI 8 LLC		
(Name of the Limited Lie (A Flo	ibility Company as it now appears on our records.) orida Limited Liability Company)	
he Articles of Organization for this Limited Liabili	ry Company were filed on 10/22/2020	and assigned
lorida document number L20000364465		
nis amendment is submitted to amend the following	ā.	
. If amending name, enter the new name of the	limited liability company here:	
he new name must be distinguishable and contain the words.	'Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	ODRESS)	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	2	
<ol> <li>If amending the registered agent and/or regist gent and/or the new registered office address he</li> </ol>		e name of the new registe
Name of New Registered Agent:		
		<del></del>
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
	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
MGRM	ETI HANINA	5954 NW 65TH TERRACE	□Add
		PARKLAND FL. 33067	□Remove
			= Change
MGR JEFF HANINA	JEFF HANINA	5954 NW 65TH TERRACE	
		PARKLAND FL. 33067	Remove
			Change
			□Add
			Remove
			Change
			□Add
			Remove
			Change
		<del></del>	☐ Change
			Remove
			□Change

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ective date, if other the effective date is listed, the	date must be specific.	and cannot be prior t	o date of filing or mo	(optional) re than 90 days after filing.	) Pursuant to 605.020
te: If the date inserted in cument's effective date of	n this block does no	ot meet the applica	ble statutory filing	requirements, this date	will not be listed a
ecord specifies a delayed	effective date, but i	not an effective tin	ne, at 12:01 a.m. o	n the earlier of: (b) Th	e 90th day after the
s filed.					•
JUNE 16		2024			
ted			<u> </u>		•
	· ho	111	•		

Filing Fee: \$25.00

Typed or printed name of signee