## LZ100005359Z

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## **COVER LETTER**

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eun ir.		L ESTATE AND CONSULTI	NG SERVICES, LLC				
SUBJEC	-I; <u> </u>	Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspo	ondence concerning this matter	to the following:				
		JUAN P MOYA					
			Name of Person	<del></del>			
		JJSV REAL ESTATE AN	D CONSULTING SERVICES.	LLC			
			Firm/Company				
		2701 SEBASTIAN CT					
		Address					
		KISSIMMEE, FL 34743					
		City/State and Zip Code					
		JMOYAHOMES@GMAIL					
		E-mail address: (	to be used for future annual report i	notification)			
For furth	er information c	concerning this matter, please c	all:				
JUAN P	МОҮА		908 2205144				
	Name o	f Person		time Telephone Number			
Enclosed	l is a check for the	he following amount:					
<b>■</b> \$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 Addres		Street Address:				
	Registration 5 Division of C		Registration : Division of C				
	P O Box 632			f Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJSV REAL ESTATE AND CONSULTING SERVICES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{01/25/2021}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JJSV CONSULTING, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	= Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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lf an effec <u>Note:</u> 11	the date, if other than the date of filing:
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t d.
Dated	MARCH 5 2021

Filing Fee: \$25.00

Typed or printed name of signee