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COVER LETTER

| TO: Registration S Division of Co | | | |
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| OF UP ATT CORE | | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Division of Corporations JBE UNDERWATER, LLC Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filling. nurn all correspondence concerning this matter to the following: Ms Gretchen Brown Name of Person JBE UNDERWATER, LLC Firm/Company 1540 SW 73 AVE Address PLANTATION, FL 33317 City/State and Zip Code JOE@JOEBLACKENTERPRISES.COM E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: then Brown Name of Person Name of Person Area Code Doytine Telephone Number Lis a check for the following amount: 00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address: Street Address: | | |
| Please return all corresp | pondence concerning this matter | to the following: | |
| | Ms Gretchen Brown | | |
| | · · · · · · · · · · · · · · · · · · · | Name of Person | |
| | JBE UNDERWATER, LL | С | |
| | | Firm/Company | |
| | 1540 SW 73 AVE | | |
| | | Address | |
| | PLANTATION, FL 33317 | | |
| | | • | , |
| | - | | t notification) |
| For further information | | · | , |
| Ms Gretchen Brown | • | |) |
| | of Person | at () Area Code Da | lytime Telephone Number |
| | | | |
| Enclosed is a check for | the following amount: | | |
| ■ \$25.00 Filing Fee | | Certified Copy | Certificate of Status & Certified Copy |
| | | | |
| Mailing Addr Registration | | Street Addres Registration | |
| _ | Corporations | Division of | Corporations |
| P.O. Box 63 | 327 | The Centre | of Tallahassee |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| JBE UNDERWATER, 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 02/05/2021 | and assigned |
| lorida document number L21000063812 | |
| his amendment is submitted to amend the following: | |
| . 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" or the ab | obreviation "L.L.C." |
| nter new principal offices address, if applicable: | |
| Principal office address MUST BE A STREET ADDRESS) | |
| | |
| | |
| nter new mailing address, if applicable: | |
| Mailing address MAY BE A POST OFFICE BOX) | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| If amending the registered agent and/or registered office address on our records, enter the name gent and/or the new registered office address here: | ie of the new regist |
| gent and/or the new registered office address nere. | |
| | |
| Name of New Registered Agent: | |
| New Registered Office Address: | -0, -: |
| Enter Florida street address | ?: |
| , Florida | 2: 1 th |
| 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 |
|--------------|-----------------|--------------------------------------|----------------|
| MGR | BROWN, GRETCHEN | 1540 SW 73 AVE. PLANTATION, FL 33317 | □Add |
| | | | □Remove |
| | | | |
| ABMR | BROWN, GRETCHEN | 1540 SW 73 AVE. PLANTATION, FL 33317 | ⊟ Add |
| | | | □ Remove |
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| ective date, if other than the effective date is listed, the date me: If the date inserted in this lument's effective date on the | ust be specific and cannot block does not meet th | e applicable statuto | ling or more than 90 cory filing requireme | _ (optional) lays after filing.) Pursuar ents, this date will not | nt to 605.020 be listed a |
| ord specifies a delayed effect filed. | ve date, but not an eff | ective time, at 12:0 | I a.m. on the earli | er of: (b) The 90th c | lay after the |
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| | | | | | |
| | Signature of a member | MGR or authorized repres | sentative of a member | | |