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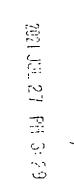
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COVER LETTER

Division of Corporations	
SUBJECT: Jt Moving And Property Rental LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Name of Person	
J. Moving And Property Kental U.C.	
Lobby US Huy 3015	
RIUCINIEN FI 33578	
City/State and Zip Code father and a Quanter Logo yahro. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
For further information concerning this matter, please call:	-um-
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Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{\$30.00 Filing Fee & \$\times \text{\$55.00 Filing Fee & \$\times \text{\$60.00 Filing Fee, } \text{\$Certificate of Status & \$\text{\$Certified Copy (additional copy is enclosed)}}\$	
Mailing Address: Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Companies (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number (2) (2)	were filed on 00/2002	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Entér new principal offices address, if applicable:	-	<u></u> _
(Principal office address MUST BE A STREET ADDRESS)		
	-	
m		
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 na	
agent and/or the new registered office address here:		
		:27
Name of New Registered Agent:		
Name Description of OCC on Address.		سر شت حمد دی
New Registered Office Address:	Enter Florida street address	~>
	**** * 1.	9
	, 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 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
MGR	Stephen Sperker	6505 Read Dr	Add
		1505 Read Dr Rivaniew Fl 3357	7 X □Remove
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Effective date, if other than the date of filing:	ng.) Pursuant to 605.0	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) rd is filed.	The 90th day after	the
Dated JULY 22, 2021, Signature of a member of authorized representative of a member		

Filing Fee: \$25.00