L21000119480

(Requestor's Name)
(Address)
(Address)
(Ĉity/State/Zip/Phone #)
\ /
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
defined dopies
Special Instructions to Filing Officer:
Achhall correction
Mi ih vil a creche
HIAN ALLCON
cird cirato Addrison on Nichment 4/9/4
CUM CCSO TO ACM SOL
I ON PRICHMUM SPE

Office Use Only



200367812252

06/08/21--01016--020 **25.00

SECULATION OF STAFF

70% - 8 PM

JUN 0-9 7021 I ALBRITTON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ MASONT	inicking LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LD1001194</u> .80	were filed on $\frac{3}{12}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3461 Middlebrook Place	
(Principal office address MUST BE A STREET ADDRESS)	St. Cloud , FL 34773	
Enter new mailing address, if applicable:	3461 Middlebrook Place	
(Mailing address MAY BE A POST OFFICE BOX)	St. Cloud, FL 34773	· 是 〇
		j. i.
		•
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the r</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floridu street address	
	Florida	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
AMBR	Jessica Nicholson	3461 Middlebrook Place	■Add
		St. Cloud , FL 34773	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			Remove
			□ Change
			🗀 Add
			Remove
			☐ Change
			□Add
			Remove
			Change

<u> </u>	
<u></u>	
	
	
iote: If the date inserted in th	the date of filing:
record specifies a delayed effit is filed.	Sective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
June 3	2021
Pated	All Carried Tolland
(U	Signature of a member or authorized representative of a member
Matthew Burman	
	Typed or printed name of signee

Filing Fee: \$25.00