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COVER LETTER

	Registration Sec Division of Corp							
	LLJ Capital	Holdings, LLC						
SUBJEC	T:	Name of Limi	ted Liability Company		·			
The enclu	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
		ndence concerning this matter						
		Jack Dickerson				_		
			Name of Person			- ဟု	207	
		Discount Garage Doors, In	c.		_	完	2021 SEP 24 PH 2: 10	•
			Firm/Company			> 5	P 2	
		7293 Sunshine Grove Rd				3.5.5	<u>ئ</u>	
			Address			THE T	H 2	
		Brooksville, FL 34613				구림	: -0	
			City/State and Zip Co	ode		- 1.,		
		jackdickerson@mac.com						
			to be used for future and	mai report nour	ication)			
For furth	er information co	oncerning this matter, please of	all:					
Jack Die	kerson		843 at ()	697-1890				
	Name o	f Person	Area Code	Daytimo	Telephone Number	er		
Enclosed	is a check for th	ne following amount:						
		□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing I Certified Cop (additional copy)	y	Certifie	Filing Fee eate of Stand Ed Copy al copy is en	itus &	
	Mailing Address Registration		Reg	et Address: istration Se				
	Division of C	Corporations		ision of Cor Centre of T				
	P.O. Box 632 Tallahassee,				e Street, Suite	810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LLJ Capital Holdings, LLC		_
(Name of the Limited Liability Compa (A Florida Limited I	лу as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L210001305</u> 48	were filed on $3/23/2021$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		721 S
		22 7
Enter new mailing address, if applicable:		%0 = .71
(Mailing address MAY BE A POST OFFICE BOX)		ESTA TO
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>s</u>	enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	uktress
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
If Chai	nging Registered Agent, <u>Signs</u>	iture 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>	Name	<u>Address</u>	Type of Action
AMBR	Nathan Hale	2233 North Hwy 17	
		Mount Pleasant, SC 29466	Remove
			□Change
			□Add
			Remove 1021 Shange 24 Add 105 STA
			☐ Change
			□ Add
			□Remove
			Change
			□Add
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) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S	
				5
				<u>-</u>
				
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be Note: If the date inserted in this block does not meet the ap document's effective date on the Department of State's rece	oplicable statutor	ng or more than 90 days af y filing requirements, t	otional) der filing.) Pursuant t his date will not be	o 605.0207 (e listed as t
e record specifies a delayed effective date, but not an effecti rd is filed.	ive time, at 12:01	a.m. on the earlier of:	(b) The 90th day	after the
Dated September 21 2021	·			
Signature of a member or	authorized represe	ntative of a member		_
<u>v</u>				

Filing Fee: \$25.00