## L21000196348

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21 HAY 28 PH 1: 04

## **COVER LETTER**

	ition Section of Corporations	
	V Management Co., LLC	
SUBJECT:	Name of I	limited Liability Company
The enclosed Artic	cles of Amendment and fee(s) are:	submitted for filing.
Please return all co	orrespondence concerning this mat	ter to the following:
	William Hamilton	
		Name of Person
	J&W Management Co.,	LLC
		Firm/Company
	9207 Wentworth Lane	
	<del></del>	Address
	Port St. Lucie, FL 3498	6
	<u></u>	City/State and Zip Code
	whamilton31@gmail.com	
For further inform	r:-man addres	s: (to be used for future annual report notification) e call:
Kevin Sizemore		615 848-1072
:	Name of Person	at ()Area Code Daytime Telephone Number
Enclosed is a chec	k for the following amount:	
■ \$25,00 Filing	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & ☐ \$60,00 Filing Fee. Certified Copy tadditional copy is enclosed) ☐ \$60,00 Filing Fee. Certified Copy tadditional copy is enclosed:
<u>Majling A</u> Registra	Address: ntion Section	Street Address: Registration Section
Division	n of Corporations	Division of Corporations
P.O. Bo		The Centre of Tallahassee
rananas	ssee. FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&W Management Co., LLC

company has been notified in writing of this change.

21 HAY 28 PH 1: 01

(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 w	ere filed on April 27, 202	and assigned
Florida document number 1.21000196348		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	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)		8 for 180
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ldress
		, Florida
	Ciņ	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe		

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. Thereby confirm that the limited liability

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>	Name	Address 21 HAY 28 PA 1: U4	Type of Action
MGR	Joyce Wentworth	9207 Wentworth Lane	= Add
		Port St. Lucie, FL 34986	■Remove
			□Change
MGR	Joyce Withrow	9207 Wentworth Lane	<b>≣</b> Add
		Port St. Lucie, FL 34986	
			□Change
			□Add
			□Remove
	<del></del>		□Add
			□Remove
			\( \tau \) Change
			□Remove
		<del></del>	□Change
			= Add
		<del></del>	= Remove
			<del></del> , 71.

	ne of Joyce Withrow was inadv	ertanlty mistyped wit	h her address as the last i	name instead of Withro	w.
			-		
					<u>.</u>
			<del></del>		
		_			<del></del>
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r effective d <u>te:</u> If the o	e, if other than the date of fi ite is listed, the date must be specific ate inserted in this block does n fective date on the Department	and cannot be prior to out meet the applicable			
	les a delayed effective date, but	not an effective time	, at 12:01 a.m. on the ear	lier of: (b) The 90th d	lay after the
ecord speci s filed.					
		2021			
s filed.	Lwoh E		ed representative of a meml	ner -	