LZ1000204460

(Re	questor's Name)	
(Ad	dress)	
(Äd	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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OCT 0 7 2021

COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

0.4.150.4.40.400	CLE J'S HOLDINGS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.
Please return all co	prrespondence concerning this matter to the following:
	ALI MATALLAH
	Name of Person
	UNCLE J'S HOLDINGS LLC
	Firm/Company
	11842 WHISPER CREEK DR.
	Address
	RIVERVIEW, FL 33569
	City/State and Zip Code
	ALIMATALLAH@YAHOO.COM E-mail address: (to be used for future annual report notification)
For further inform	ation concerning this matter, please call:
ALI MATALLAH	813 816-5415
	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	k for the following amount:
≡ \$25.00 Filing	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	Address: Street Address: Ation Section Registration Section
_	n of Corporations Division of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ICLE I'S HOLDINGS LLC

UNCLE IS HOLDINGS LLC		
(Name of the Limited Lia (A Flo	bility Company as it now appears on our orida Limited Liability Company)	records.)
(1116		2
The Articles of Organization for this Limited Liabilit	y Company were filed on 05/03/2021	and assigned
Florida document number L21000204460		
This amendment is submitted to amend the following	; :	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation	"LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DDRESS)	
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •	·	
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registe	ered office address on our records.	enter the name of the new register
agent and/or the new registered office address her		
Name of New Registered Agent:		
N. B. '. LOG All		
New Registered Office Address:	Enter Florida street	address
		Fla.::Ja
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registe	ered Agent:	
		16.46
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and	- ,	· ·
accept the obligations of my position as registered		
being filed to merely reflect a change in the regist	tered office address. I hereby confit	
company has been notified in writing of this chang	ge.	

If amending Authorized Person(s)	authorized to manage.	, enter the title,	name, and	l address of eac	h person	being added
or removed from our records:						

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address Add SEI 30 PH 5: 14	Type of Action
MGR	TARGUI, YOUNESS	11842 WHISPER CREEK DRIVE	□Add
		RIVERVIEW, FL 33569	
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			Change
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			□ Remove
			□ Change

	2021 SEC 30 PM 5: 14
	,
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicated document's effective date on the Department of State's records.	(optional) to date of filing or more than 90 days after filing.) Pursuant to 605.0207 table statutory filing requirements, this date will not be listed as
e record specifies a delayed effective date, but not an effective tir rd is filed.	me, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 09 20 , 2021	_ ·