12/17/21, 11:16 AM



Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : I20190000122 Phone : (407)863-0096 Fax Number : (407)612-2181

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JJM CHESINE LLC

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations	H21000459399 3
F	JJM CHESINE LLC	
SUBJ	Name of Limited Liability Company	
The er	nclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this matter to the following:	
	EMERSON CORREA	
	Name of Person	
	ICONNECT SOLUTIONS CORP	
	Firm Company	
	6735 CONROY ROAD STE 309	
	Address	
	ORLANDO, FL 32835	
	City/State and Zip Code	
	CONTACT@ICONNECTSC.COM	
	E-mail address: (to be used for future annual report non	fication)
For fu	urther information concerning this matter, please call:	
	EMERSON CORREAat (_407)863 _ 0	096
		e Telephone Number

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

Street Address:

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

H21000459399 3

	IJM CHESINE LLC		
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears (la Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability 0 Florida document number L21000226009		05/14/2021	and assigned
This amendment is submitted to amend the following:			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
A. If amending name, enter the new name of the lin	nited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Lin Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD		ignation "LLC" or the abb	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		ords, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Florid	la street (klibress	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Register	ed 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.

To: +18506176383 Page: 4 of 5 2022-01-04 18:59.05 GMT 14076122181 From: EMERSON CORREA

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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	MARILIA S CHESINE GOIS	AV. FERNANDO DEL PORTO SANTOS, 245	□Add
		PRESIDENTE PRUDENTE, SP 19053-847 BR	=Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			DAdd
			🗆 Remove
			□ Change
			🗀 Add
			DRemove
			□Change
			🗆 Add
			□Remove
			□ Change

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ffective date, if other than the o	ate of filing:	(optional)
an effective date is listed, the date must	he specific and cannot be prior to date of filir	ng or more than 90 days after filing.) Pursuant to 605.0207 (cy filing requirements, this date will not be listed as t
ocument's effective date on the De	partment of State's records.	y ming requirements, this date with the control of
record specifies a delayed effective d is filed	date, but not an effective time, at 12 01	Laim on the earlier of (b). The 10th day after the
Dated DECEMBER 20	. 2021	
	- 	80730 K2

Typed or printed name of signee