## 121 000 267018

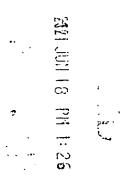
(Requestor's Name)
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	PROPERTY AND INVESTM  Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	JAY LAURIENZO		
		Name of Person	
	J SQUARED PROPERTY	AND INVESTMENT LLC	
		Firm/Company	
	2405 W TEXAS AVE AP	T 2	
		Address	·
	TAMPA FLORIDA 33629	)	
	-	City/State and Zip Code	
	JLAURIENZO@PIPDOC.		
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
JAY LAURIENZO			
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	ic following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro	porations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2521 JU. 18 PM 1: 26

J SQUAD PROPERTY AND IN			
(Name of the Lir	nited Liability Co. (A Florida Limi	mpany as it now appears of ted Liability Company)	n our records.)
The Articles of Organization for this Limited	Liability Compa	any were filed on 06/08/	2021 and assigned
Florida document number L21000267018			and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited l	iability company here:	
J SQUARED PROPERTY AND INVESTMENT	LLC		
The new name must be distinguishable and contain the	words "Limited L	iability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRESS,	)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>	N/A	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered offic ess here:	ce address on our reco	rds, enter the name of the new register
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida s	street address
	N/A		, Florida <sup>N/A</sup>
		City	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 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

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<u>Title</u>	<u>Name</u>	Address 2921 JUN 18 PM 1: 26	Type of Action
VP	JESSICA SCOTT	540 TRINITY LN N APT 8226	□Add
		ST. PETE FLORIDA 33716	
			□ Change
VP	JESSIE SCOTT	540 TRINITY LN N APT 8226	\equiv Add
		ST. PETE FLORIDA 33716	□Remove
			Change
			□Add
			□Remove
			[]Change
			DAdd
			□Remove
			DChange
			CIAdd
			□Remove
			□Change
			□Add
			□Remove
			☐ Change

THE CORRECT ENTITY NAME I	IS SUPPOSED TO BE J SQUARED PROPERTY AND INVESTMENT LLC
AND THE VP NAME IS JESSIE S	COTT NOT JESSICA SCOTT, PLEASE UPDATE YOUR RECORDS
TO REFLECT THESE CHANGES.	
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	197. 1-20
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, and the same of	
ive date, if other than the date o	of filing: (optional)
ective date is listed, the date must be spe-	of filing:
ent's effective date on the Departme	ent of State's records.
d specifies a delayed effective date, led.	but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
06/09/2021	·
	ure of a member or authorized representative of a member

Filing Fee: \$25.00