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T. MATTHEWS FEB 28 2022

· COVER LETTER

TO:	Registration Section Division of Corpor			
SUBJEC	∵T∙	J3RE L	LC	
	···		Liability Company	
The encl	losed Articles of Am	endment and fec(s) are submit	tted for filing.	
Please re	eturn all corresponde	nce concerning this matter to t	the following:	
		Janz	nah Jordan Name of Person	
				·
			Firm/Company	
		29 0a	kwood rd. Address	
	_		City/State and Zip Code O Jellowbirdr be used for future annual report notification	250
For furth	ner information conc	erning this matter, please call:		
Ja	nnah s	Jordan	at (904) U35-2 Area Code Daytime Tele	2290 ephone Number
Enclosed	d is a check for the fo	ollowing 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 Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address:		Street Address:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13	RE	LLC	22 F :	14 Fri 3: 50
(<u>Name of the Limited Liab</u> (A Flori	ility Compa ida Limited I	ny as it now appea Jability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L 21000 30 1</u>			10 30	21 and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liab	ility company h	ere:	
The new name must be distinguishable and contain the words "L	imited Liabil	lity Company," the c	Jesignation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADL	DRESS)			
Enter new mailing address, if applicable: "Mailing address MAY BE A POST OFFICE BOX"				
B. If amending the registered agent and/or register agent and/or the new registered office address here		address on our r	ecords, <u>enter t</u>	he name of the new registere
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Flo	rida street address	
<u> </u>			Floa	rida
		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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Jannah Jordan	29 Dakwood rd. Jacksmille Beh FL 32	SCAdd 250 Remove
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an etfe <u>ote:</u>	ve date, if other than the date of filing:
recore is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated _.	February 15. 2022.
	Signature of a member or authorized representative of a member
	Jannah Jordan