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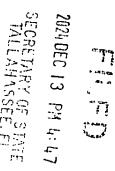
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER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

TO: Registration Sec Division of Corp			·	
SUBJECT:,	MC Food 8 Name of Limi	TECH LLC ted Liability Company	· ——-	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter t	to the following:		
	JESUS JMC 1900 D B	Mactio Callela Name of Person Tood & TECH Ll Firm/Company AYShare De 4005 Address		
	Mi	AHL F 33 13 2. City/State and Zip Code		
		O @ HORAVELL . COM. To be used for future annual report notification		
	E-mail address: (t	o be used for future annual report notificati	ion)	2021
For further information co	oncerning this matter, please ca	all:	ALL ALL	2024 DEC 13
JESUS MI Name of	netio Callera	at (<u>GSU</u>) <u>51204 &</u> Area Code Daytime Te	lephone Number of Signature	BH ST
Enclosed is a check for the	e following amount:			1,7
52 \$ 25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is en	atus &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JHC FO	OD & TECH	<u>LLC</u>		
(Name of the Limited L (A F	ability Company as it now forida Limited Liability Com	appears on our records.) pany)		
The Articles of Organization for this Limited Liabil. Florida document number <u>L2100032</u> 4	ity Company were filed	on <u>07/16/26</u>	<u>21 </u>	and assigned
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the JHC ZEAL STATE The new name must be distinguishable and contain the words	= 11C		r the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on ere:	our records, <u>enter th</u>	e name office 13	7 (200 2 (200 2 (200 2 (200)
Name of New Registered Agent:	<u> </u>		15 CS 13 CS	<u> </u>
New Registered Office Address:	Er	uer Florida street address Flori	TE A	-
-	City	, Fiori		p 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>	Address	Type of Action
			
			□ Remove
			□Change
			□ Add
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-		15.55 15.55	70	
_				"tend"
Note:	ve date, if other than the date of filing: 12.05.120.24 (operive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at if the date inserted in this block does not meet the applicable statutory filing requirements, tent's effective date on the Department of State's records.	ter filing.) Pur	suant to 60 not be li	05.0207 (3 sted as th
e record ord is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ed.	(b) The 90t	h day aft	ter the
Dated _	Dec 05th. 2024.			
	- The state of the			
	Signature of a member or authorized representative of a member			
	,			