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COVER LETTER

	Registration Se Division of Cor			
		HERS JC COMPANY.LLC		. · ·
SUBJEC	Т;		ited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		JAVIER RODRIGUEZ LO	PEZ	
			Name of Person	
		THE BROTHERS JC COM	MPANY, LLC	
			Firm/Company	
		8050 NW 8TH STREET A	PT 303	
			Address	
		MIAMI FL 33126		
			City/State and Zip Code	
		javierrodriguezlopez0209@	-	
			to be used for future annual report	notification)
For furthe	er information c	oncerning this matter, please ca	all:	
JAVIER RODRIGUEZ LOPEZ		786 569-111 at ()		
	Name o	l'Person	Area Code Da	sytime Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	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 Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Addres	
	Registration S	section	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

THE BROTHERS JC COMPANY, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/26/2021 and assigned Florida document number L21000336575 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BROTHERS JC COMPANY, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent

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	JAVIER RODRIGUEZ LOPEZ	8050 NW 8TH STREET APT 303 MIAMUFL 33120	27 A 1 A
			□Remove
			□Add
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Effective date, if other than the date of filing:					
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