## L21000344273

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		COVER LETTER *	· ·				
10: Registration Section Division of Corporations							
SUBJECT: JC STR	ONG SECURITY, LLC	· · · · · · · · · · · · · · · · · · ·	<del></del>				
	Name of Lim	ited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filling.					
Please return all corresp	ondence concerning this matter	to the following:					
	Corpor	ate Maintenance Le	ad				
	<del></del>	Name of Person	<del></del>				
	Processing Department						
		Firm Company					
		1450 Vassar St					
		Address	<del></del>				
		Reno, NV 89502					
		City/State and Zip Code					
		ocs@incauthority.com to be used for future annual report node					
		·	(ication)				
For further information (	concerning this matter, please co	all:					
Process	sing Department	at ( 800 ) 638-2320					
Name o	of Person		e Telephone Number				
Enclosed is a check for t	he following amount:						
☐ \$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 Status & Certified Copy (additional copy is enclosed)				
Regist Divisk P.O. B	ANG ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURI Registration Section Division of Corpor Clinon Building 2661 Executive Ce	n ations nier Circle				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JC STRONG SECURITY, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Funited Liamoty Company)
The Articles of Organization for this Limited Liability Company were filed on 07/29/21 and assigned Florida document number L2 1000344273  This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
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:
Emer Florida street address
Emer 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 complywith 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

H 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

Title Name Address Type of Action

MGR Maguy Amain 4880 W. Colonial Dr. □ Add

Orlando, FL 32808 □ Remove
□ Change

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ni ci.,	re date, if other than the date of filing: N/A (optional) crive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
cunic	nt's effective date on the Department of State's records.
reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
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	Surface stamember or authorized representative of a member
	Jean Claude Jean

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Filing Fee: \$25.00