## 121000349035

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	ddress)	
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(B	usiness Entity Name)	
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Special Instructions to	Filing Officer;	

Office Use Only



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## **COVER LETTER**

TO:

ro:	Registration Sec Division of Corp			•	•	<b>*</b>
77.ID 417.		rices 1. LLC				
SUBJE	CT:	Name of Lim	ited Liability Company			
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		Jason D. DeCicco				
		-	Name of Person		•	
		Jay D Services 1, LLC			<del></del>	
		<del> </del>	Firm/Company		023 S	
		4324 82nd Street West			2023 SEP 29 PH 4: 02 SECRETARY OF STATE TALL/ BY SEEL FL	-
			Address		- 25 <b>9</b>	:
		Bradenton, FL 34209				
			City/State and Zip Code		02	
		jaydservices llle@gmail.com	n to be used for future annual report notif	ication)		
For furt	her information co	oncerning this matter, please ca	•	iounon)		
Jason E	). DeCicco		941 666-0264			
	Name of	Person	at ()	Telephone Number	·	
Enclose	d is a check for th	e following amount:				
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 8	310	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jay D Services 1, 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  $\frac{2/5/2023}{}$ and assigned Florida document number L21000349035 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: Enter Florida street address , Florida City

## 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>	Address	Type of Action
AMBR	Shannon R DeCicco	4324 82nd Street W	<b>=</b> Add
		Bradenton, FL 34209	□ Remove
MGR	Tyler M Wilson	4324 82nd Street W	<b>@</b> Add
		Bradenton, FL 34209	□ Rетюче
			Change  Change  Change  Change  Change  Remove
			☐Change
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			□ Remove
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tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing or mor.  If the date inserted in this block does not meet the applicable statutory filing	e than 90 days after filing.) Pursuant to 605,020 requirements, this date will not be listed a
ment's effective date on the Department of State's records.	•
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on filed.	the earlier of: (b) The 90th day after the
d 9/27/2023 6:25 a.m.	
Signature of a member or authorized representative of	C
Signature of a memoer or authorized representative of	i a memoer

Filing Fee: \$25.00