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OCT 21 2021 A RAMSEY

COVER LETTER

TO:

TO: Registration Se Division of Cor			,
ŠUBJECT:	JAIR BAR	TECD LLC ited Liability Company	Tenks .
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
		Name of Person	
	JACK.	BANFIELD L	(LC
	1483 B	Brielgede WA	9
	Fleming :	Ts LAW FL City/State and Zip Code	32003
	1jb ARKER E-mail address: (O be/bo4th. no to be used for future annual	el report notification)
For further information c	oncerning this matter, please c	all:	
	BATKER	at (904)	269-7090 Daytime Telephone Number
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for th	ne following amount:		
™ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee Certified Copy (additional copy is er	Certificate of Statu
Mailing Addres Registration S			Address: ration Section
Division of C	Corporations	Divisi	on of Corporations
P.O. Box 632 Tallahassee, I		-	entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

	• • • •	5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. (101.001	12 AM 11: 57
	(Name of the L	MANFIELD, LL imited Liability Compa (A Florida Limited)	i <mark>ny as it now appe</mark> Liability Company)	ars on our records.)	ARY OF STATE
TI A 2 1 C/S 2 2 2		117177	471 1	10 JEN 11	SSEE, ELON
The Articles of Organization			were filed on _	0 -2 21	and assigned
Florida document number	L 21000 3	75 <u>884</u>			
This amendment is submitted	d to amend the	following:			
A. If amending name, ente	er the new nam	e of the limited liab	ility company l	<u>iere</u> :	
The new name must be distinguish	nable and contain t	he words "Limited Liabi	lity Company," the	designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices	address, if ap	plicable:		·	
(Principal office address M)	<u>UST BE A STR</u>	(EET ADDRESS)			
Enter new mailing address	, if applicable:				
(Mailing address MAY BE /	4 POST OFFI	CE BOX)			
R. If amonding the vegictor		• '	address on our	records, <u>enter the n</u>	ame of the new register
***		_/3ARM	EC, Jimmy	C Se.	
agent and/or the new regist	istered Agent:	_/3ARM			
agent and/or the new regist Name of New Regi	istered Agent:			orida street address	
agent and/or the new regist Name of New Regi	istered Agent:		Enter Fl		
agent and/or the new regist Name of New Regi New Registered Of	istered Agent:		Enter Fl	orida street address	Zip Code
agent and/or the new regist Name of New Regi	istered Agent:		Enter Fl	orida street address	

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
Mar	RICH ALSUP	1483 Bridgette Way FLEMING ISLOWN FL 32003	ŒAdd
			🗀 Remove
			□Change
MIR	RIAAN PIETELS	Die D 10/3/21	□Add
		3348 CANYON FAIR DR. Green Cove FAIRS R 32013	Remove
			Change
MgR	+ BAMFIELD + CO. LLC	1483 Bridgette Way FLEMING ISLEND FL 32003	≰Add
			Remove
			□Change
MGR	Michelle Pisters	3348 Canyon Falls Tr. Green Cove Springs FL 32043	Ndd
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

								
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		<u> </u>						
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effective dat e: If the da	e, if other than te is listed, the date ate inserted in the fective date on the	must be specific is block does n	and cannot be job of meet the ap	prior to date of f opticable statut	ling or more tha		filing.) Pursuant te	
cord specifi filed.	ies a delayed effi	ective date, but	not an effecti	ve time, at 12;	01 a.m. on the	earlier of: (b)	The 90th day	after the
ed	8.5	2/	_·	·				
			_ Á	3ake				_
		Signature o	of a member or	authorized repre	sentative of a m	ember		_

. . . .