## L21000384469

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100413017701

07/31/23 --01012--010 \*\*25.00

SECRETARY OF STATE



## **COVER LETTER**

Division of Corporations		
SUBJECT: J&J FUN	Ships LLC  Name of Limited Liability Company	<del></del>
The enclosed Articles of Amendment and	fee(s) are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
Zona	ald Jeffrey Small	<u> </u>
78	J Funships LLC Firm/Company	
3490	Perinsula Cir Address	
Melb	City/State and Zip Code	)
<u>Jeffr</u>	eySmall C mind S ORI mail ddress: (to be used for future annual repo	not.Com rt notification)
For further information concerning this ma	atter, please call:	
Jeff Smal Name of Person		01-9034 Daytime Telephone Number
Enclosed is a check for the following amou	unt:	
\$25.00 Filing Fee		S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Addre	::SS:

TO:

**Registration 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

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\underline{A}$ UFlorida document number $\underline{L21000384469}$ .	ugusta7,2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	esignation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	TASE 28
(Principal office address MUST BE A STREET ADDRESS)	ARE C
Enter new mailing address, if applicable:	IARY OF PH
(Mailing address MAY BE A POST OFFICE BOX)	OP. S. C.
Midding duaress MAT BE AT 031 01 FICE BOXY	5 S
B. If amending the registered agent and/or registered office address on our reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	
Enter Flori	da 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_. Florida \_\_\_

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>	Name	Address	Type of Action
MGR	Heather Small	3496 Deninsula Cir	
		Melbourne, FL 32940	Xremove
			□Change
MBR	Joshua Lacy	3496 Peninsula Cir	□Add
	•	Melbourne, FL 32940	Extremove
			□Change
			□Add
			□Remove
			□Change
	<del></del>		□Add
		·	□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

		<del> </del>			
<del></del>		<del></del>			
		-			
				-	
			. <u></u>		
				Þα	<del>. ~</del>
	<u></u>			بر د آ_ د	<u> </u>
			<del></del>	AHASSI ASSI	
					<del></del>
		· · · · · · · · · · · · · · · · · · ·		1080A	
				77	<u> </u>
					<del>_</del>
	<del></del>			<del></del>	
ective date, if other than the effective date is listed, the date inte: If the date inserted in this unient's effective date on the	ust be specific and can block does not meet	anot be prior to date o t the applicable stat	f filing or more than 90 o		
cord specifies a delayed effect s filed.	ive date, but not an	effective time, at 1	2:01 a.m. on the earli	er of: (b) The 90th	day after the
ed July 25		3023. P			
<del></del>	Signature of a more	ther or authorized rer	presentative of a member	:r	