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COVER LETTER

TO:

TO:	Registration Sec Division of Corp					
1-1148 PF1	J)	ESANLI HOUSE, LLC				
SUBJE	CI:	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 correspoi	ndence concerning this matter	to the following:			
		DI C	ARLO MARIA GRAZIA			
			Name of Person			
		JES	ANLI HOUSE	E, LLC		
			Firm/Company			
			101 Monterey Bay Dr.			
			Address			
			Boynton Beach, FL 33426			
			City/State and Zip Code			
		je	sanlihousellc@hotmail.com			
		E-mail address: (to be used for future annual report no	otification)		
For furtl	her information co	oncerning this matter, please c	all:			
	DI CARLO MA	RIA GRAZIA	305 7134819			
	Name of	Person	at () Area Code Dayti	me 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)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration S		Street Address: Registration S	ection		
Registration Section Division of Corporations			Registration Section Division of Corporations			
	P.O. Box 632	7	The Centre of Tallahassee			
	Tallahassee, F	EL 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned Florida document number ____L21000390133 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JESANLI HOUSE, LL.C The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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.

Cirv

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	BENAVIDES, LILIANI		🗆 Add
		101 Monterey Bay Dr, Boyaton Beach, FL 33426	Remove
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ffective date is	other than the da listed, the date must be	specific and canno	t be prior to date of fill	ing or more than 90 da	(optional) ys after filing.) Pursuant t	o 605.0207 (3
	inserted in this block ive date on the Depa			ry filing requireme	nts, this date will not be	e listed as th
	i delayed effective da	ite, but not an eff	ective time, at 12:0	1 a.m. on the earlie	r of: (b) The 90th day	after the
filed.					DANNY SAM	
i	FEBRUAR	Y 24TH 202	13		Signal State of Public - State of Commission # 44.65 My Commission # 520165 Oct.	is 337 - 🔓
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