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COVER LETTER

Division of Co					
JJ TEXTI					
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	JENNIFER GARCIA				
	-	Name of Person			
		Firm/Company			
	16274 SW 44 LANE				
	MIAMI, FL 33185	Address			
	jengarcia0820@gmail.com				
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	tification)		
JENNIFER GARCIA		305 927-7952			
Name	of Person	at () Area Code Daytir	ne Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	S30.00 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 Addre		<u>Street Address:</u> Registration Se	ection		
Division of Corporations		Division of Corporations			
Registration	Section Corporations 27	Street Address: Registration So Division of Co The Centre of	tadditional copy is ection rporations		

Tallahassee, FL 32303

Zoho Sign Document ID: 2BF33A25-RS9CDQJN5NYQ_ZURGCA9-C_QLBA7TFCGOSHRA_ZM-QW

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ TEXTIL LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compa.	ny were filed on 08-31-2021	and assigned
lorida document number	·	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	ability company here:	
OH GENERAL SERVICES LLC		
he new name must be distinguishable and contain the words "Limited Lia	bility 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)		•
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Tuning dualess SIAT BE A TOST OF FICE BOX		
	-	
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the	name of the new registe
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	G.
	City	a Zip Code

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.

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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
			□Remove
			[]Change
			□Add
			□Remove
			□Change
			□Add _
			□Remove
			□Change
			□Remove
			[]Change
			□Remove
			□Change
			□Add
			□Remove
			Change

	Signature of a member of	or authorized represe	ntative of a member	
Jennifer	García			
Dated	- 2024	··		
e record specifies a delayed effecti rd is filed.	ve date, but not an effec	ctive time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
Effective date, if other than the If an effective date is listed, the date in Note: If the date inserted in this Edocument's effective date on the F	ist be specific and cannot be dock does not meet the	se prior to date of fili applicable statutor	(option or more than 90 days after the filling requirements, this	iline v Pursuant to 605 0207
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				-

Filing Fee: \$25.00