

L21000415267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

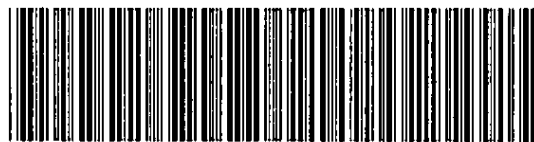
(Document Number)

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2021 OCT 15 AM 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FL





Heather K. Hudson  
hhudson@handfirm.com  
DIRECT 850 769 3434 / FAX 850 769 6121

October 11, 2021

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: JAB104, LLC

To Whom It May Concern:

Enclosed please find the Articles of Amendment to Articles of Organization of JAB104, LLC for filing. Also enclosed is a check in the amount of \$25.00 for the filing fee.

If you have any questions or need any additional information, please let us know.

Sincerely,

A handwritten signature in cursive script that reads 'Amy Meyer'.

Amy Meyer, Paralegal  
Heather K. Hudson

/am

Enclosures: As stated.

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2021 OCT 15 AM 3:02

SECRETARY OF STATE  
TALLAHASSEE, FL

JAB104, 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 September 20, 2021 and assigned  
Florida document number L21000415267.

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

City, Florida 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.*

**If Changing Registered Agent, Signature of New Registered Agent**

MGR = Manager  
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10/5 2021

Alysia Lentz  
Typed or printed name of signee