K21 COC 417942

(Requestor's Name)
(Address)
(Address)
(100.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

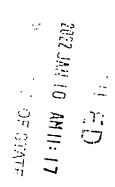
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COVER LETTER

TO: Registration Se Division of Cor			
	irtners, LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeffrey M Stassi		
		Name of Person	
	J2 Ecom Partners, LLC		
		Firm/Company	•
	1910 Tarpon Lane, 303		
		Address	•
	Vero Beach, FL 32960		
	-	City/State and Zip Code	•
	j2ecompartners@gmail.com	to be used for future annual report notification)	
For further information of	concerning this matter, please co		
Jeffrey M Stassi		618 791-0309	
Name o	of Person	Area Code Daytime Telephone Numbe	r
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
<u>Mailing Addre</u> Registration		Street Address: Registration Section	
Division of C		Division of Corporations	
		The Continue Callaboration	

P.O. Box 6327 Tallahassee, FL 32314

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The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J2 Ecom Partners, LLC		
(Nume of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Comparison for this Limited Liability Comparison $\frac{L21000417942}{L21000417942}$.	ny were filed on September 24, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ibility Company," the designation "LLC" or t	ne 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 offic agent and/or the new registered office address here:	re address on our records, enter the	name of the new registere
Name of New Registered Agent:		2022 SEC

New Registered Office Address:	Enter Florida street address	0 0
	, Florid	Zip Ede
New Registered Agent's Signature, if changing Registered Age	nt:	ATA ATA
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent of being filed to merely reflect a change in the registered offi-	ete performance of my duties, and 1 is provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

company has been notified in writing of this change.

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
President	Jeffrey M Stassi	1910 Tarpon Ln; 303, Vero Beach, FL 32960	□ Add
			≣Remove
			■Change
AMBR	Jeffrey M Stassi	1910 Tarpon En; 303, Vero Beach, FL 32960	🗆 Add
			□Remove
			Change
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(If an eff Note:	etive date, if other than the date of filing:	r filing.) Pursuant to 605,0207 (3)(
the recor	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (I tiled.	b) The 90th day after the
Dated	January 5 2022	
Dated	John A Stary	
	Signature of a number or authorized representative of a member	

Filing Fee: \$25.00

Typed or printed name of signee