10/31/22, 2:49 PM

Division of Corporations

17183041175

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document

(((H220003722583)))



H220003722583ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086

: (718)569-2703

Fax Number

: (718)504-7890

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JRF REAL ESTATE LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. BRUMBLEY

 $\ddot{\sim}$

 \overline{c}

NUV - 2 2022

Electronic Filing Menu Corporate Filing Menu

Help

(((H22000372258 3))) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION -OF

JRF REAL ESTATE 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 Con	npany were filed on 11/15/2021	and assigned
Florida document number L21000487066		20
This amendment is submitted to amend the following:		FIL 2022 OCT 3 SECONDIAN
A. If amending name, enter the new name of the limited		
		SS > M
The new name must be distinguishable and end with the words "Limito	ed Liability Company," the designation "LLC"	
Enter new principal offices address, if applicable:	,	<u> </u>
(Principal office address MUST BE A STREET ADDRES	SS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 810642 BOCA RATON, FL 3348	1
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	Circ	Zip Cock

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

Page 1 of 3 (((H22000372258 3)))

To.

MGR = Manager

(((H22000372258 3)))
If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			☐ Remove
			d Add
			□ Remove
-			blA 🗆
			☐ Remove
			_
			U 700
			□ Remove
			☐ Remove
			D Add
			□ Remove

To:	Pager 5 of 5	2022-10-31 18:55:15 GMT	17183041175	From: Alexander Englard

f amending any other inform	(((H22000372258 3))) nation, enter change(s) here: <i>(Attach aa</i>	lditional sheets, if necessary.)
		1.7.7
	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2
fective date, if other than th	se date of filing:	(optional)
ne effective date must be specific, can ne date this document is filed by the	ec date of filing: most be prior to date of receipt or filed date and car Florida Department of State)	nnot be more than 90 days after
40704	2022	
_{ated} 10/31	2022	
Dated 10/31	2022	
ited 10/31	Justin Friedman	
ated 10/31	Signature of a member of authorized represent	lative of a member
Justin Freed	Justin. Free dans. Signature of a member of authorized represent	falive of a member

Page 3 of 3

(((H22000372258 3)))