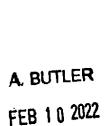


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





02/01/22--01015--028 **25.00



COVER LETTER

TO: Registration Division of C			,
JAM Hot	using, LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Jordan Jones		
		Name of Person	
	JAM Housing, LLC		
		Firm/Company	
	12548 westfield lakes circ	le	
		Address	
	winter garden, fl 34787		
		City/State and Zip Code	
	jordan34man@gmail.com F-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please e	·	
Jordan Jones		407 4627804	
Name	e of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the 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)
<u>Mailing Addr</u> Registration		Street Address: Registration Sec	ction
Division of	Corporations	Division of Cor	porations
P.O. Box 6.	327	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

			even [ur io
JAM Housing, LLC				
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited I	ny as it now appea liability Company)	urs on our records.)	. 12
The Articles of Organization for this Limited Liab Florida document number 1.21000529383		were filed on 12	2/16/2021	and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of t	he limited liab	ility company h	<u>ere</u> :	
n/a				
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the	designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	n/a		
Principal office address MUST BE A STREET ADDRESS)				
-		_ 		
			•	
Enter new mailing address, if applicable:		n/a		
Mailing address MAY BE A POST OFFICE BO	OX)			
_		,		
B. If amending the registered agent and/or regagent and/or the new registered office address		address on our i	records, <u>enter the r</u>	name of the new regist
Name of New Registered Agent:	n/a		<u></u>	
New Registered Office Address:				
in a miles in the markets.		Enter Flo	orida street address	
			Minute .	
		City	гютюа	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. Thereby 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Jordan Jones	12458 Westfield lakes circle	
		Winter Garden, FL 34787	□Remove
			■ Change
AMBR	Wyatt Montgomery	2556 Maude Rd	□AJd
		Wauchula, Fl 33873	□Remove
			= Change
			□Add
			□Remove
			☐Add
			□ Remove
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	01/01/203	7		
	ate of filing: e specific and cannot be pri			Pursuant to 605,0207
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Filing Fee: \$25.00