## k22000033727

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE CORPORATION 2022 MAY -3 AM 8: 16:

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## **COVER LETTER**

TO:		gistration Section vision of Corporations		RECEIVED		
	JSA Produ	cts LLC				
SUBJE	CT:	Name of Lim	ited Liability Company .	<del>2022 MAY = 5</del> AM 8: 07		
			•	SEC.L. SÍATE TAULAHATSEE.FL		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Jay Reubens				
			Name of Person			
		JSA Products, LLC				
		Firm/Company				
		Palm Beach Gardens, Fl. 33418  City/State and Zip Code  drj@reliableppes.com				
		E-mail address: (	to be used for future annual repo	rt notification)		
For furth	ner information of	concerning this matter, please c	all:			
Jay Reu	bens		561 50434: at ()	10		
	Name o	of Person		Paytime Telephone Number		
Enclosed	d is a check for t	he following amount:				
<b>■ \$25</b>	.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)		

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JSA Products, 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 January 24, 2022 and assigned Florida document number 1.22000033727 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: Jay Reubens Name of New Registered Agent: 12939 Alton Rd New Registered Office Address: Enter Florida street address Palm Beach Gardens

## 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.

City

f Changing Registered Agent, Signature of New Registered Agent

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
MGR	Sallie A Adams	6586 W. Atlantic Ave	□Add
		Delray Beach, FL 33446	<b>≣</b> Remove
			□Change
MGR Jay Reubens	Jay Reubens	12939 Alton Rd	
		Palm Beach Gardens, FL 33418	□Remove
			□Change
		<del></del>	□Add
			□Remove
			□Change
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			□ Change
			□Add
			□Remove
			□Change

I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afted.

April 27

2022

Signature of a member or authorized representative of a member

Sallie A Adams

Typed or printed name of signee