h22 0000 337 27

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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A. BUTLER OCT 3 1 2022

COVER LETTER

ΓO: Registration Se Division of Cor	porations		
SUBJECT: JSA	PRODUCTS, LC	-	
	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	lau Royal	Da 15	
	Juyno	Name of Person DUCTILL C	
	ISA Davi	Niver (C.	
	JJA FICO	Firm/Company	
	12939	ACTON Kd.	
	- Palm B	each Gardens, F	ZC 33418
	danceube	City/State and Zip Code	(on
		to be used for future annual report not	
For further information co	oncerning this matter, please c	all:	
J. O. 14	~ · C	at (561) 504-	744 O
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
men with sent and deport	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	£.	<u> Street Address:</u>	
Registration S		Registration Se	ection
Division of C	=	Division of Co	•
P.O. Box 632		The Centre of	
Tallahassee, I	L 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F. ED

(Name of the Limite	d Liability Compa A Florida Limited	any as it now appears on Liability Company)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	M 7: 59			
The Articles of Organization for this Limited Lia	Articles of Organization for this Limited Liability Company were filed on Javany 24202FF, and assigned da document number						
This amendment is submitted to amend the follo	wing:						
A. If amending name, enter the new name of	ent is submitted to amend the following: ing name, enter the new name of the limited liability company here: must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." rincipal offices address, if applicable: fice address MUST BE A STREET ADDRESS) ailling address, if applicable: ress MAY BE A POST OFFICE BOX) ing the registered agent and/or registered office address on our records, enter the name of the new registered the new registered office address here:						
The new name must be distinguishable and contain the we	ords "Limited Liabi	ility Company," the design	ation "LLC" or the abb	reviation "L.L.C."			
Enter new principal offices address, if applica	ible:			<u></u>			
(Principal office address MUST BE A STREE	T ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>8<i>0X</i>)</u>						
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our recor	ds. <u>enter the name</u>	of the new registered			
Name of New Registered Agent:	Jay Ro 12939	bers Livn Rd					
New Registered Office Address.	Palm	Enter Florida s Beauty Coodle	irect address ML Florida 3 {	29 P			
		L HV		rays course			

New Registered Agent's Signature, if changing Registered Agent:

15A PRODUCTS LCC

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

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 Type of Action Name Address Title Sallie Addons 6586 W. Attanhe Ave DAdd Debruy Beach, FC 33446 Remove 12939 Acron Rd. Add MGR Jay Revbors Paln Beach Gorden, FC BRemove _____ □Change Mil Saylowbax 13815 Eneron St #207 MAdd Paln Beach Caroles, FC 32418 Remove □ Change _____ □Change _____ □ Add ☐ Change

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an eff lote:	date, if other than the date of filing:	207 as
record is fil	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th	nę.
ated	July 5 2022	
	Signature of 3 member or authorized representative of a member	
	Jay Revbeus	



The form

2022 OCT 24 AM 10:55

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2022

JAY REUBEUS 12939 ACRON RD. 13815 ENERGY F # 207 PALM BEACH GARDENS, FL 33418

SUBJECT: JSA PRODUCTS, LLC

Ref. Number: L22000033727

We have received your document for JSA PRODUCTS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 422A00022390

Thank you

www.sunbiz.org

District CO and DO DOY COOK M Hill . . . District cook