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## **COVER LETTER**

TO: Registration Division of C			,	
CUBICT	MR. BOYD S	SANDWICHES		
SUBJECT:	<u>-1</u>	nited Liability Company	<del> </del>	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing		
Please return all corres	pondence concerning this matter	to the following:		
	Josh	Mame of Person		
		Home Solutions	LLC	
	890	Firm/Company  W CloWer 5  Address 33830	<del></del>	
	Bartow	Address  J. FL  City/State and Zip Code  OME SOLUTIONS @ Yar  to be used for future annual report no		
		City/State and Zip Code		
	UNS r	nome Solv Flors (a) Yak to be used for future annual report no	100 Colf	
For further information	concerning this matter, please of	•		
Joshua	Boyd	at ( <u>813</u> _,368	3 -8463	
Name	e of Person	Area Code Daytir	ne 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)	
Mailing Address:		Street Address:		
Registration Section Division of Corporations			Registration Section	
P.O. Box 63			Division of Corporations The Centre of Tallanassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MR. BOYD S	ANDWICHES	10000000000000000000000000000000000000
Name of the Limited Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.)
MR. BOYD S  Name of the Limited Liability Com (A Florida Limite)  The Articles of Organization for this Limited Liability Compar  Florida document number <u>L22000036239</u> .	ny were filed on Janu	lary 19th 2022 and assigned 5
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lize  JNS Home Solut: The new name must be distinguishable and contain the words "Limited Lia"	ions LLC	ation "L.L.C" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	N	4
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Florida st	treet address
	City	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, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Change
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Rетюve
			□Change
			Петюче
		<del>-</del>	□Add
			Петюче
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I Want to amend article III Provisions.
I have the Purpose of the business as
food truck/trailer. I am jooking at getting it
Changed to real estate real estate investing,
handy Work. Any Provision(s) that fit along
those lines. If there is anithing else needed
Please reach me at My Cell. Thank You.
E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) is:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the record is filed.
Dated May 1St 2022
Dated Mai 1 2022
Signature of a member or authorized representative of a member
Total Did
Typed or printed name of signee
PRIDA