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	questor's Name)	
(Re	questoi s Maine)	
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PICK-UP	■ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

JK FIREAF	RMS TRAINING, LLC				
30131.C1.	Name of Limi	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:			
	SHERI CERRETA				
		Name of Person		_	
	ROBERT J. WELLEN, JR	., P.A.			
	<del></del>	Firm/Company		-	
	1323 N. PARSONS AVE.			202 3	
	·	Address		2 HA	,
	BRANDON, FL 33510			2022 MAR 11 PM 12: 1	j
		City/State and Zip Code		-1'-( 	
	sheri@wellencpa.com			22	
	E-mail address: (	to be used for future annual report not	fication)		
For further information c	oncerning this matter, please c	all:		,-, <b>W</b>	
SHERI CERRETA		813 643-2904 at ( )			
Name o	f Person	Area Code Daytim	e Telephone Numbe	:r	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &	
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee e Street, Suite t	810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
	022
iability Company were filed on FEB	RUARY 9, 2022 and assigned
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owing:	-co
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f the limited liability company her	<u>e:</u>
	1 <sub>17</sub> . <b>6</b>
vords "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
able:	
ET ADDRESS)	<u> </u>
<del></del>	
ROY	
<u></u>	
	cords, <u>enter the name of the new registe</u>
ss here:	
JOHN F. KIRK, III	
Enter Florid	la street address
	, Florida
City	Zip Code
	words "Limited Liability Company," the describle:  ET ADDRESS)  BOX)  registered office address on our reconst here:  JOHN F. KIRK, III  Enter Florid

## 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
AMBR	JOHN F. KIRK, III		□Add
			Remove
		<u> </u>	■Change
			□ Add
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ective date. if	other than the date of filing: (optional)	
i 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 6 inserted in this block does not meet the applicable statutory filing requirements, this date will not be li	i05.0200 isted as
cument's effect	ive date on the Department of State's records.	
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at	fter the
s filed.		
march 7	2022	
ıca		
	Jet List III	
<del>-                                    </del>	Signature of a member of authorized representative of a member	
JOHN	F. KIRK, III	