## h22000081654

questor's Name)	
dress)	
iress)	
//State/Zip/Phone	e #)
☐ WAIT	MAIL
siness Entity Nan	ne)
cument Number)	
Certificates	of Status
Filing Officer:	
	:
	dress)  dress)  //State/Zip/Phone  WAIT  siness Entity Nan  cument Number)  Certificates

Office Use Only



300382915293

03/07/22--01035--028 \*\*60.00

2022 HAR -7 AM 6: 14 SECRETARY OF STATE TALLAHASSEE PATE

A. BUTLER MAR 2 1 2022

## **COVER LETTER**

TO:	Registration Division of C			
SUBJEC		EALTY LLC		
SUBJEX	~ I ·	Name of Lim	ited Liability Company	
		of Amendment and fee(s) are sub	_	
		KELSI MICHELLE JOYN	IER	
			Name of Person	<del></del>
		E.N.J REALTY LLC		
			FirmvCompany	
		5601 EDENFIELD RD AF	PT 104	
		·	Address	
		JACKSONVILLE, FL 322	77	
		KELSIJ1001@GMAIL.CO	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For furth	er information	n concerning this matter, please ca	alt:	
KELSI I			904 775-0184 at ()	
	E.N.J REALTY LLC  FirmvCompany  5601 EDENFIELD RD APT 104  Address  JACKSONVILLE. FL 32277  City/State and Zip Code  KELSIJ1001@GMAIL.COM  E-mail address: (to be used for future annual report notification)  or further information concerning this matter, please call:  ELSI MICHELLE JOYNER  904  775-0184			
Enclosed	l is a check for	r the following amount:		
□ \$25.	00 Filing Fec	☐ \$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

(Name of the Limited	Liability Compa	iny as it now appears o Liability Company)	n our records.)
The Articles of Organization for this Limited Liab			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of th	ne limited liab	ility company here	:
KELSI MICHELLE JOYNER LLC			
The new name must be distinguishable and contain the word	ds "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	5601 EDENFIELD	PRD APT 104
(Principal office address MUST BE A STREET ADDRESS)		JACKSONVILLE	FL 32277
			M de la companya de l
Enter new mailing address, if applicable:		5601 EDENFIELD	RD APT 104
Mailing address MAY BE A POST OFFICE BO	<u> </u>	JACKSONVILLE	FL 32277
			120
B. If amending the registered agent and/or reg- agent and/or the new registered office address I Name of New Registered Agent:			ords, <u>enter the name of the new regist</u> o
<del>-</del>			
New Registered Office Address:	2001 EDENEIR	ELD RD APT 104  Fruer Florida	street address
	JACKSONVIL		Florida 32277
	<del></del>	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>	Name	Address	Type of Action
		<del></del>	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
	·	<del></del>	□Add
			□Remove
			☐ Change
			□Add
			□Remove
		<del></del>	□Change
			□Add
			□Remove
			□Change
		<del></del>	🗆 Add
			□Remove
			□Change

			<del>.</del>	<del></del>
				<del></del> -
				<del></del>
		<del> </del>		<del></del>
	<del></del>			<del></del>
			<b></b>	
<del></del>				
	= 10-1			<del></del>
			-	· <del></del>
	ate of filing:	o date of filing or more tha	(optional) n 90 days after filing.) Pursuant	to 605,0207
Effective date, if other than the data must be a lift an effective date is listed, the date must be a lift and in this block document's effective date on the Department.	ck does not meet the applica	ble statutory filing requ	irements, this date will not	pe listed as
<b>Note:</b> If the date inserted in this bloc	ck does not meet the applica partment of State's records.	ble statutory filing requ		oe listed as
Note: If the date inserted in this bloc document's effective date on the Dep e record specifies a delayed effective	ck does not meet the applica partment of State's records.	ble statutory filing requ		oe listed as
Note: If the date inserted in this bloc document's effective date on the Dep e record specifies a delayed effective rd is filed.	ck does not meet the applica partment of State's records. date, but not an effective tin	ble statutory filing requ		oe listed as
Note: If the date inserted in this bloc document's effective date on the Deperture of the date of the Deperture of the Depe	ck does not meet the applica partment of State's records. date, but not an effective tin	ne, at 12:01 a.m. on the	earlier of: (b) The 90th da	oe listed as

Filing Fee: \$25.00