(1	Requestor's Name)	
(/	Address)	
	Address)	
((City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(1)	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to F	iling Officer:	





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10/20/2022

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State **FROM**

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 10/25/2022

PRIORITY Regular Approval

OUR REF # (Order ID#) 1081939

ORDER ENTITY

CEDAR JONES HOLDINGS LLC

PLEASE PERFORM THE FOLLOWING SERVICES: CEDAR JONES HOLDINGS LLC (FL)

File the attached amendment and provide a certified copy.

NOTES:

\$55.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, October 25, 2022 Page 1 of 1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 01.7.25 77.11:46

y as it now appear ability Company)	rs on our records.)	11L.	
vere filed on	03/04/2022	and assigned	
lity company he	e <u>re</u> :		
ty Company." the c	lesignation "LLC" or t	he abbreviation "L.L.C."	
21218 St. Andrews Blvd., #732,			
Boca Raton, Fl	orida 33433		
21218 St. Andr	rews Blvd., #732.		
Boca Raton, Fl	orida 33433		
. <u> </u>	records, enter the	name of the new registe	
	, Florid		
1	ity company ho ty Company." the c 21218 St. Andr Boca Raton, Flo 21218 St. Andr Boca Raton, Flo ddress on our r	ity company here: ty Company," the designation "LLC" or to 21218 St. Andrews Blvd., #732, Boca Raton, Florida 33433 21218 St. Andrews Blvd., #732, Boca Raton, Florida 33433 ddress on our records, enter the	

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 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	Robin Mayer	21218 St. Andrews Blvd., #732,	□Add
		Boca Raton, Florida 33433	□Remove
			■Change
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If an effec <u>Note:</u> If	re date, if other than the outive date is listed, the date must fithe date inserted in this bloomt's effective date on the De	be specific and c ck does not me	cannot be prior to set the applica	o date of filing or i	more than 90 days a	fler filing.) Pursuant	to 605.0207 be listed as
	specifies a delayed effective	date, but not a	n effective tir	me, at 12:01 a.m	on the earlier of	: (b) The 90th da	y after the
	u.						
rd is filed	October 24	·	2022				
rd is filed	October 24				Co		

Filing Fee: \$25.00