## L22000130488

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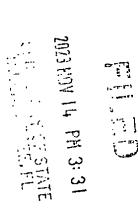
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## **COVER LETTER**

JMJ Invest SUBJECT:	ment Group LLC	٨			
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	pmitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jahel Adams				
		Name of Person	······································		
	JMJ Investment Group LL	С			
	***************************************	Firm/Company			
	1719 Henley Rd				
		Address			
	Middleburg, FL 32068				
		City/State and Zip Code			
	jmjinvestmentgroup@gmai	l.com			
	E-mail address: (	to be used for future annual report notifi	cation)		
For further information c	oncerning this matter, please c	ali:		20 E	
Jahel Adams		706 951-9591 at ()		2023 HOV 14 PM	T]
Name o	f Person	Area Code Daytime	Telephone Number	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	- weers - weers
Enclosed is a check for th	ne following amount:			PM 3:	1-2-
■ \$25,00 Fiting Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	ng Feo 그	

TO:

**Registration Section Division of Corporations** 

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

JMJ Investment Group LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{3/11/2022}{1}$ and assigned Florida document number 1.22000130488 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1719 Henley Rd Enter new principal offices address, if applicable: Middleburg, FL 32068 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: 묽 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

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

Title	<u>Name</u>	Address	Type of Action
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Effective date, if other than the date of fan effective date is listed, the date must be spective. If the date inserted in this block document's effective date on the Department.	eific and cannot be prior es not meet the applic	able statutory filing	(optional) re than 90 days after filing.) requirements, this date w	Pursuant to 605.0. ill not be listed	207 ( Las 1
e record specifies a delayed effective date, and is filed.	but not an effective ti	me, at 12:01 a.m. oi	the earlier of: (b) The	90th day after t	the:
Dated November 8	2023	<u> </u>			
		<u>/</u>			
Signatu	ure of a member or author	orized representative o	f a member	<del></del> -	

Filing Fee: \$25.00