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(Re	equestor's Name)	
(Ac	idress)	
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T. MATTHEWS MAY - 3 2022

COVER LETTER

то:	Registration So Division of Cor			
SUBJEC	Jhon Mark	eting Company LLC	•	
SOBJEC	-1:	Name of Lin	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Michael Dempsey		
			Name of Person	
		ZenBusiness Inc.		
			Firm/Company	
		5511 Parkerest Drive Suite	: 103	
			Address	
		Austin, Texas, 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co	om to be used for future annual report not	345
For furth	er information c	oncerning this matter, please c	·	inteanon)
	Dempsey c/o Zo	- ·	844 493-6249	
		f Person	at ()	ne Telephone Number
	Name	TTENON	Area Code Dayin	ne Telephone Number
Enclosed	is a check for th	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	action
	Division of C		Division of Co	

P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATIONS OF CORPORATIONS OF 22 APR 13 AN IO- 06

Jhon Marketing Company LLC		
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 1.22000133841	ty Company were filed on 2022-03-17	and assigned
This amendment is submitted to amend the following	<u>2</u> :	
A. If amending name, enter the new name of the I	limited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the	: abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2	
B. If amending the registered agent and/or registe agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	

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

Zip Code

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	Jahan Zaib	4071 L.B Mcleod RD ste D PMB 102	□Add
		Orlando, FL 32811	□Remove
			≡ Change
			□Add
			□Remove
			□Add
			□Remove
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Effective date, if other than the date an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and can does not meet	not be prior to a the applicabl	date of filing or mo	re than 90 days after t	filing.) Pursuant to 6	
record specifies a delayed effective d d is filed.	ate, but not an e	effective time	, at 12:01 a.m. o	n the earlier of: (b)	The 90th day at	fter the
Pated April 6		022				
lsl Jahan Zaib						
Si	nature of a memi	ber or authoriz	ed representative of	of a member		

Filing Fee: \$25.00