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(Request	ors Name)	
(Address)	-
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PICK-UP	WAIT	MAIL
(Rusines:	s Entity Name)	
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Certified Copies	Certificates of	Status
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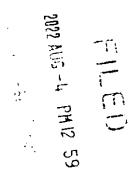




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LLC Amend

08/04/22--01014--014 +#25.00



A. RAMSEY OCT 2 5 2022

COVER LETTER

TO:

TO: Registration Se Division of Cor			
SUBJECT:	JOM DIE	ITAL, LLC	
NUMBET.	Name of Lim	ITAL, CIC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joden	David Maxim Name of Person	
		Pane of Fermi	
	<u> </u>	Firm/Company	
	41880 14	Address	
	Bris Re	-tm PC 33436 City/State and Zip Code	1
For further information c		g,ns, t - Com to be used for future annual report not	
Jordan U	naxim	at (<u>1010</u>) <u>105 </u>	- (447
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
Z 1 \$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	ection
Division of C		Division of Co	
P.O. Box 632	•	The Centre of	-
Tallahassee,		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

0 000 0 (3)	THE COLUMN THE STATE OF THE STA
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)
	March 27 games
	mpany were filed on March 23,7372 and assigned
lorida document number <u>L22000 i 42 i 48</u>	-
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applicable:	SS) Duca Patrice PC 73474
Principal office address MUST BE A STREET ADDRE	SS) Buch Rates PC 73474
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered o	office address on our records, enter the name of the new reg
3. If amending the registered agent and/or registered o	office address on our records, <u>enter the name of the new reg</u>
3. If amending the registered agent and/or registered of the second seco	
3. If amending the registered agent and/or registered of gent and/or the new registered office address here:	
3. If amending the registered agent and/or registered of the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Forder David Maxim For Hankers Was Enter Florida street address
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office 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.

MA Junging 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
Member	Jorden Maxim	4880 thinks long Boun Retin	\dd
•		FC 33434	□Remove
			□Change
			□Add
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			□Change
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If an eff Note:	ve date, if other than the date of filing:
e recor rd is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	8/1/2022
	Signature of a member or authorized representative of a member
	Typed or printed name of signee