Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.

Account Number : I20230000190 Phone : (844)449-3624

Fax Number : (512)597-0678

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email | Address: | | |
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JPY MANAGEMENT LLC

| Certificate of Status | () |
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| Certified Copy | U |
| Page Count | 04 |
| Estimated Charge | \$25,00 |

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| TO: Registration So Division of Cor | | | |
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| JPY Monaj | gement LLC | | |
| SUBJECT; | Nune of Lin | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | bnitted for titing. | |
| | indence concerning this matter | | |
| | Allison Menzou | | |
| | | Name of Person | |
| | ZenBusiness INC | | |
| | | Firm/Company | |
| | 336 E. College Ave Suite | 301 | |
| | | Address | |
| | Tallahassee, FL 32301 | | |
| | | City/State and Zip Code | |
| | fulfillment@zenbusiness.co | | |
| | | (to be used for future annual report notification) | |
| For further information c | encerning this matter, please c | (31): | |
| c/o ZenBusiness INC | | 844 493-6249 | |
| Name o | f Person | at () Area Code Daytime Telephone Number | _ |
| Enclosed is a check for the | ne following amount: | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55,00 Filing Fee & ☐ \$60,00 Filing F Certified Copy tadditional copy is coclosed: Certified Copy tadditional copy is | Status & |
| <u>MailingAddres</u> | | Street Address; | |
| Registration 5 | | Registration Section Division of Corporations | |
| Division of C P.O. Box 632 | = | The Centre of Tallahassee | |
| Tallohaceae | | 2415 N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

JPY Management 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 $\frac{2022-04-05}{1}$ Florida document number 1.22000163385 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 most be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (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: 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Floridastreet address

Hamending 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 |
|--------------|----------------|--|--|
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From: ZenBusiness User

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| /s/ Yunior Sc | ntiago Riveron Signature of a member or authorized repre | | |