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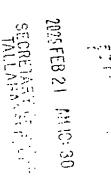
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations	•	
GUNDESCE IPS.MARK	KETING & CONSULTING LL	C	
SORTER!: A STATE		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:	
	Stacy M. Partin		
		Name of Person	<u> </u>
		Firm/Company	
	223 Club House Boulevar	d	
		Address	
	New Smyrna Beach, FL 3		
	stacypartin7118@gmail.com	City/State and Zip Code	AND
		to be used for future annual report noti	ication) PA
For further information e	oncerning this matter, please c	all:	SECRETARY (Tree)
Stacy Partin		at (386) 214-6731	
Name o	f Person	Area Code Daytime	e 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 & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	is:	Street Address:	
Registration S	Section	Registration Sec	rtion
Division of C	•	Division of Cor	porations
P.O. Box 632	.7	The Centre of T	allahassee

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JPS MARKETING & CONSULTING LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/20/2022 and assigned	
Florida document number 1.22000236625		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Services by JPS, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	223 Club House Boulevard	
(Principal office address MUST BE A STREET ADDRESS)	New Smyrna Beach, FL 32168	
	, 	
Enter new mailing address, if applicable:	223 Club House Boulevard	
Mailing address MAY BE A POST OFFICE BOX)	New Smyrna Beach, FL 32168	
	57	
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registered	
agent and/or the new registered office address here:	芸芸して	
Name of New Registered Agent:		
New Registered Office Address:	V. O	
	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 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	Partin, Stacy Marie	223 Club House Boulevard	□Add
		New Smyrna Beach, FL 32168	□Remove
			■ Change
MGR	Partin, Justin Wade	223 Club House Boulevard	- □Add
		New Smyrna Beach, Fl. 32168	□Remove
			■ Change
		,——————————————————————————————————————	□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□ Remove
			Change
			□Remove
			□Changa

Effective date, if other than the date of filing:	_	
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