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2022 JUN TO PH 4: 11

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Mark Smith			
		Name of Person		
	MM & T of jax services			
		Firm/Company		
	3866 campenero court unit	. 8		
Address				
	Jacksonville,FL 32217			
		City/State and Zip Code		
	masmith2578@gmail.com E-mail address: (to be used for future annual report not	nification)	
For further information	concerning this matter, please c	all:		
Mark Smith		904 536-3967 at ()		
Name	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for (the following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed	

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**

FILED

M.M. & T OF JAX Services LLC

2022 JUN 10 PM 4: 11

(Name of the Limited Liab (A Flor The Articles of Organization for this Limited Liability)	oility Company a ida Limited Liabi	s it now appear lity Company)	s on our rec	ords.)	<u>. 10 4: 14</u> . 10:30 - 1
The Articles of Organization for this Limited Liability	, Company wei	e filed on ^{Ma}	y 23,2022	MULAHAS	SEE, FL and assigned
Florida document number L22000239686					and assigned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability	company he	<u>re</u> :		
The new name must be distinguishable and contain the words "Li	imited Liability C	ompany," the de	esignation "L	LC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	_				
(Principal office address MUST BE A STREET ADD	<u> DRESS)</u>				
	_	<u>_</u>			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	_				
(Maning duaress MAT BE A FOST OFFICE BOX)				<u> </u>	
B. If amending the registered agent and/or register agent and/or the new registered office address here:	ed office addr :	ess on our re	cords, <u>ent</u>	er the name	of the new registered
Name of New Registered Agent:					
New Registered Office Address:					
		Enter Florid	da street addi	ress	
			1	Florida	
New Registered Agent's Signature if shanning Daries		City			Zip Code
New Registered Agent's Signature, if changing Registered agent hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	t and agree to complete perf agent as provi red office add	ormance of n ded for in Cl	ny duties, hapter 605	and Lam fan 5. F.S. Or if	illiar with and this document is

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Owner/mgr	Mark Smith Jr	3866 campenero court unit 8	= Add
		jacksonville.fl 32217	□Remove
			□Change
AR	Toyia N. Spencer	3866 campenero court unit 8	□Add
		jacksonville	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ffective date, if other than	the date of filing:	(optional)
an effective date is listed, the da	must be specific and cannot be prior to date of filing or more the is block does not meet the applicable statutory filing requality.	han 90 days after filing.) Pursuant to 605.0207
	ne Department of State's records.	
	tradica dan barangan ara-akaranian ara-akaran ara-akaran ara-akaran ara-akaran ara-akaran ara-akaran ara-akaran	and the state of t
I is filed.	ective date, but not an effective time, at 12:01 a.m. on th	ie earner of: (b) The 90th day after the
huna d	2022	
Dated June 4	. 2022	
\ j o	iai Caanaa	
/	Signature of a member or authorized representative of a	member
1/1	in II Soelloed	
1_U	Typed of printed name of signee	