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SECALIGNEY PERSON

A. RIVERS

JUL 2 2 2023

COVER LETTER

TO:

Registration Section Division of Corporations

J3A SUBJECT:	PLUS LLC		
SUBJECT:	Name of Lin	nited Liability Company	<u> </u>
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
		Jennifer E Andrews	
		Name of Person	
	J3A PLUS LLC		
		Firm/Company	
	3855 S Atlantic Apt 1202A		
		Address	
	Daytona Beach Shores, FL	. 32118	
		City/State and Zip Code	
	donnie_andrews@me.com		
	E-mail address: (to be used for future annual rep	port notification)
For further information	concerning this matter, please c	all:	
Donald	Andrews	405 at (343-5156
Name	e of Person	Area Code	Daytime Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclos	S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclose
Mailing Addi Registration Division of P.O. Box 6 Tallahassee	n Section Corporations 327	Division of The Central 2415 N. M	ress: on Section of Corporations re of Tallahassee Monroe Street, Suite 810 ee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J3A PLUS LLC

company has been notified in writing of this change.

(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 L22000249422 L22000249422		and ass	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
J3A+ LLC			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or	the abbrevi	ation "L.	L.C."
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 agent and/or the new registered office address here:	name of	the nev	v register
Name of New Registered Agent:	S. S.	2023	
New Registered Office Address:	포션 항공	KAY	1:
Enter Florida street address		ည	i
, Florid	a <u></u>	2	111
City	73 72 72 72 72 72 72 72 72 72 72 72 72 72	p Co de	·
New Registered Agent's Signature, if changing Registered Agent:	5	ŋ	
I hereby accept the appointment as registered agent and agree to act in this capacity. I furthe provisions of all statutes relative to the proper and complete performance of my duties, and I			

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

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
			□Add
			□Remove
			☐ Change
			□Add
			□Reniove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Change
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			□Remove
			☐ Change

Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (obeging the file inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occurrent's effective date on the Department of State's records. record 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 dis filed. Signature of a member or softherized representative of a member			
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