## L22 000251107

(Re	equestor's Name)
(Ad	ldress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(Bu	isiness Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to	_
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## **COVER LETTER**

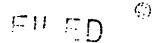
Registration Section

TO:

Division of Cor	porations		,	
CUBIFCT.	FUN IN THE SU	N JETSKI LLC		
SUBJECT:	Name of Lim	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:		
	EDWIN	FOX/KAHNEETA HAYES		
		Name of Person		
	FUN I	IN THE SUN JETSKI LLC		
		Firm/Company		
	15	41 SADDLEHORN DR		
		Address	* · · · · · · · · · · · · · · · · · · ·	
	!	LAKELAND, FL 33810		
	<del></del>	City/State and Zip Code		
		FOXEFOX@GMAIL.COM		
	E-mail address: (	to be used for future annual report no	tification)	
For further information of	concerning this matter, please c	all;		
EDWIN FOX		813 893-9574 at ()		
Name c	of Person	Area Code Daytii	ne Telephone Number	
Enclosed is a check for t	he 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 Address Registration Division of C	Section	Street Address: Registration Solvision of Co		
P.O. Box 632	-	Division of Corporations The Centre of Tallahassee		
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	FUN IN THE SUN JETS	SKILLC	2022 JUN 27	PH 1: 03
(Name of the Lin	nited Liability Company a (A Florida Limited Liab	is it now appears on our ility Company)	TECOTOE TARY	<u>or en:</u>
	,		INLLAHASSES	
The Articles of Organization for this Limited	Liability Company we	re filed on JUNE 01	, 2022	_ and assigned
Florida document numberL22000251	1107			
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liability	y company here:		
The new name must be distinguishable and contain the	e words "Limited Liability C	Company," the designation	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appl	licable:			
(Principal office address MUST BE A STRE	<u>EET ADDRESS)</u>			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	E POV			
ON WHITE WALL BE A LOST OF FICE	<u>r bua)</u> _			
	~~			
B. If amending the registered agent and/or agent and/or the new registered office addr		ress on our records.	, <u>enter the name o</u>	of the new register
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida stree	d address	
			, Florida	
		City		Zin Code

## 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.

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>	<u>Address</u>	Type of Action
MGR	KAHNEETA HAYES	1541 SADDLEHORN DR	≣∧dd
		LAKELAND, FL 33810	□Remove
			☐ Change
MGR EDWIN FOX	EDWIN FOX	3307 W AILEEN ST	<b>≡</b> Add
		TAMPA. FL 33607	□ Remove
			□Change
	<del></del>		□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	
			□ Add
		-	□Remove
			□Change
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			□Remove
			□Change
			□ ∧dd
			□Remove
			☐ Change

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(If an c <u>Note:</u>	tive date, if other than the date of filing:
ne reco	, /
Dated	6/22/2022 Cl 42
	Signature of a member or authorized representative of a member