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COVER LETTER

TO:

Registration Section

Division of Co	orporations							
GJR Ende	avors LLC		•					
SUBJECT:Name of Limited Liability Company								
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.						
Please return all corresp	ondence concerning this matter	to the following:						
	Geizi Rojas							
		Name of Person						
	GJR Endeavors LLC							
		Firm/Company						
	701 Putt Lane							
		Address						
	Kissimmee, FL 34759							
	 	City/State and Zip Code	·					
	rojasgeizi@yahoo.com							
than frage in commet		to be used for future annual report no	tification)					
	concerning this matter, please e	all:						
Geizi Rojas		321 945-6443 at ()						
Name of Person		Area Code Daytir	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 Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GJR Endeavors 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 6/10/22 Florida document number L22000265853 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 must 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: 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.

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	Merari Rojas	701 Putt Lane	
		Kissimmee, FI 34759	■Remove
			□Change
MGR Geizi Rojas	Geizi Rojas	701 Putt Lane	■Add
		Kissimmee, FL 34759	Remove
			□ Change
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vote. If the date inserted in this block does not meet the applicable statutory filing requirements, this d	ling.) Pursuant to 60: late will not be list	5.0201 ted as
ocument'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 offe	ar tha
t is filed.	The 70th day and	-1 1116
. 7/2/22		
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Signature of a member of authorized representative of a member		