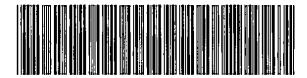
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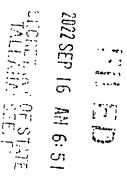
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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A. BUTLER
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#### **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Cor	porations			
cunicat.	1US2SFF Fra	terneises 1	LC	
SUBJECT:	JUS 2 SEE Ent	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	/			
	JESSici	A D. VERAS Name of Person		
		Name of Person		
	Jus 2 SEE	Enterprises, Firm/Company	LLC	
		Firm/Company	-	<del></del>
	_100 Rings 10	OINT DR. Suit		
	Sum Tla	Rosal El	23160	
	Sunny Isles	Beach, FL. City/State and Zip Code	30,00	<del></del> .
	E-mail address: (	yahoo.com to be used for future annual	report notifica	ition)
For further information co	oncerning this matter, please c	all:		
KFITH M	. NEILLY f Person	305	902-	9397
Name of	f Person	Area Code	Daytime T	elephone Number
	0.11			
Enclosed is a check for the	_			_
<b> ✓ \$25.00</b> Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		Sectificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Addres		Street A		
Registration S Division of C		~	ration Section of Corpo	
P.O. Box 632	•		entre of Tal	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

FIFE ability Company as it now appears on our records) 16 orida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on - Florida document number \_\_\_ L 22000 319 748 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 "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 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 \_\_\_\_\_. Florida \_\_\_\_ 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being adde or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	KEITH M. NEILLY	400 Kings Point Dr. Suite 927	CFAdd
		400 Kings Point Dr. Suite 927 Sunny Isles Beach, Fl. 33160	□Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
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(If an effi Note:	ive date, if other than the date of filing: 7/19/2020 (optional) ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
If the record record is fil	d 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 led.
Dated	Sept. 13th 2022
	1 1 1 1



Department of State / Division of Corporations / Search Records / Search by Entity Name /

### **Detail by Entity Name**

Florida Limited Liability Company JUS2SEE ENTERPRISES LLC

#### Filing Information

**Document Number** 

L22000319748

FEI/EIN Number

NONE

**Date Filed** 

07/19/2022

**Effective Date** 

07/18/2022

State

FL

**Status** 

**ACTIVE** 

#### Principal Address

400 KINGS POINT DR

**SUITE 927** 

SUNNY ISLES BEACH, FL 33160

#### Mailing Address

400 KINGS POINT DR

**SUITE 927** 

SUNNY ISLES BEACH, FL 33160

#### Registered Agent Name & Address

NEILLY, KEITH M

400 KINGS POINT DR

**SUITE 927** 

SUNNY ISLES BEACH, FL 33160

#### Authorized Person(s) Detail

Name & Address

Title AR

VERAS, JESSICA D 400 KINGS POINT DR SUITE 927 SUNNY ISLES BEACH, FL 33160

#### **Annual Reports**

No Annual Reports Filed