L22 000 320 825

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400396229374

10/18/22--01016--009 **55.00

2022 OCT 18 PM 4:55 SECRETARY OF S PATE

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	JAL	USFLLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all corresponder	ondence concerning this matter	to the following:			
		Anthony Morales			
	Name of Person				
		MyUSACorporation.com			
Firm/Company					
1 Radisson Plaza, Suite 800				2022 OCT 18 PH 4: 55	
Address				를 를 를 하는 기를 들어 되었다. 기를 기를 하는 기를 들어 되었다. 기를 기를 하는 기를 하는 기를 되었다.	
New Rochelle, New York 10801				(1) CO	
		City/State and Zip Code) <u>=</u>	
	info@myusacorporation.cor	n to be used for future annual report noti	Contine		
For further information c	oncerning this matter, please ca	·	nearron		
Anthony Morales		877 330-2677			
Name o	f Person	at () Area Code Daytim	e Telephone Number		
Enclosed is a check for the	ne 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 Certificate of Certified Co (additional cop	of Status & opy	
Mailing Addres Registration S	Section	Street Address: Registration Se			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JALU	SELLC		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>1.22000320825</u>	were filed on <u>07/19/2022</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	15390 SW 20 ST.		
(Principal office address MUST BE A STREET ADDRESS)	MIAML FL 33185		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ime of the new registered	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City	Zip 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>	Address Type of Action	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			TACR Genange
			SECRITOR DAdd PH GRemove SS
			□Change
			□Remove

 -			- -			<u> </u>
 						
		·				
		•				
-		<u>. </u>	<u></u> .			
		·				
				<u> </u>	ु जाग	202
		_			D CR	‡ 22 Od
					23	<u> </u>
					S	
						<u></u>
					<u></u>	<u>ග</u>
effective date	, if other than the date e is listed, the date must be s	of filing:		(o	otional)	ant to EDE D'
Note: If the da	ite inserted in this block d	loes not meet the ap	plicable statutory	filing requirements,	this date will n	ot be listed
document's eff	ective date on the Depart	ment of State's reco	rds.			
e record specifi	es a delayed effective date	e, but not an effecti	ve time, at 12:01 a	ı.m. on the earlier of	(b) The 90th	dav after ti
rd is filed.		-,	- Secret as valid to		\.,\	
	October 7th	2022				
Dated			—·~	/2//		
				173	•	
			authorized represent			