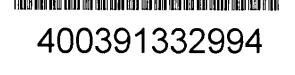
LZZ 000336971

(Requestor's Name)
(Address)
(Address)
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TO:

Registration Section

COVER LETTER

Division of Cor	Division of Corporations			
	1.0			
SUBJECT: Lamb JK I		ited Liability Company		
		. , ,		
The angloced Articles of	Amendment and fee(s) are sub	mitted for filing		
		_		
Please return all correspo	ondence concerning this matter	to the following:		
	Juan C Cordero	Name of Person		
		Name of Person		
	Lamb JK LLC			
		Firm/Company		
	367 Meadow Ridge Dr			
		Address		
	St Augustine, FL 32092	City/State and Zip Code		
	j0912cordero@hotmail.com	·		
		to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c	all:		
Juan Cordero Name o	of Person	at (904) 303-1136 Area Code Daytim	e Telephone Number	
		, not code Daysin	o respirate transcor	
Fundament in a sharp for all	h. C. Harrian a re			
Enclosed is a check for the				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &	
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
Mailina Addus		C44 4 J		
Mailing Address: Registration Section		Street Address: Registration Sec	ction	
Division of C	Corporations	Division of Cor		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lamb JK LLC		
(Name of the Lim	ited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited 1	Liability Company were filed on 07/30/2022	and assigned
Florida document number 1.22000336971	 ·	
his amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	72
Principal office address MUST BE A STRE	ET ADDRESS)	
		<u> </u>
Enter new mailing address, if applicable:		SSEE.
Mailing address MAY BE A POST OFFICE	S BOX)	05
3. If amending the registered agent and/or gent and/or the new registered office addr	registered office address on our records, <u>ente</u> ess here:	er the name of the new register
Name of New Registered Agent:	Cordero, Juan C	
New Registered Office Address:		
	Enter Florida street addr	ess
		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 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
AMBR	Cordero, Juan C	367 Meadow Ridge Dr	⊟Add
		St Augustine, FL 32092	□Remove
			□Change
			□Add
			□ Remove
			Change
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(If an e Note	fretive date, if other than the date of filing: frective date is listed, the date must be specific and cannot be prior to date of filing or more the lifthe date inserted in this block does not meet the applicable statutory filing recomment's effective date on the Department of State's records.	(optional) nan 90 days after filing.) Pursuant to 60 quirements, this date will not be list	05.0207 sted as
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th	e earlier of: (b) The 90th day aff	ter the
Date	August 3rd , 2022		
	$\mathcal{N}_{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{\mathcal{N}_{N}}}}}}}}}}$		
	Signature of a member or authorized representative of a	member	

Filing Fee: \$25.00

Typed or printed name of signee