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(Re	equestor's Name)	
(Ad	ldress)	_
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(Cit	ty/State/Zip/Phone	e #)
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TALLAHASSEE, FL

FILED
2022 AUG 22 NH IO: 3

COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT:	JPJ US	ia cic		
	Name of Lim	ited Liability Company		
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	JP.	Simple Company		
	- +36 N	rth 893+ 47 th F	1 + 636	
		Address		
	Deertield"	Beach FL 33044 City/State and Zip Code		
	E-mail address: (to be used for future annual report notific	ation)	
For further information co	ncerning this matter, please c	all:	022.1 FCR TAL	
Marcela G	Demiciano	at (454) S41 71	TAR LAHA	Marine Trans
Name of	Person	to be used for future annual report notific all: at (454) Syl 74 Area Code Daytime 1	'elephone Number SS O	
Enclosed is a check for the	e following amount:			
S≥5.00 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 So Division of Co P.O. Box 6327	ection orporations	Street Address: Registration Secti Division of Corpo The Centre of Tal	orations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite)	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Lia	ability Company were filed on 34 3477	8/04/2022	and assigned
This amendment is submitted to amend the follow			
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the des	ignation "LLC" or the ab	brevieton "L.L.C."
Enter new principal offices address, if applica	ble:	75	P. E.
Principal office address MUST BE A STREET	TADDRESS)		P 2
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B	<u>30X)</u>	C i	SEE STATE
B. If amending the registered agent and/or re agent and/or the new registered office address	s here:		
Name of New Registered Agent:	Marcela Giova	and Domician	16
New Registered Office Address:	Marcela Giove 732 North East	47th PI F	432
	12/110/110	327 () () () () () () () () () (
	Decrfield Beach	Florida	3944
	C thy:		zīp 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.

Marcela Giovanni Demiciano

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>	Addre	255	_	Type of Action
MGR	Jo40 Paulo Domicio	inc Fernandes	732 NG 47th P1 #	U32	_ 🖸 Add
		<u>`De</u>	erfield Beach, Fl	3344	_ □Remove
			-		_ □Change
					_ □Add
					_ 🗆 Remove
					_ Change
				SECF	_ Add 2022
				RETARY OF STATE	DAdd 2022 Remove Change DChange Ddd
					_ □Remove
					_ □Change
					_ □Add
					_ □Remove
					_ Change
					_ □Add
					_ □Remove
					_ □Change

	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	It I am asking to amend my CCC because I
	MISpelled my home. My home is Marcela
_	A I am asking to amend my clo because I MISpelled my home. My home is Marcela Grovenn Domiciano. I would also like to add my son as a manager to my
	add my son as a manager to my
	company!
_	
	
	SEC. 7A.
	HAR 2
	SP II
Effective da	ite, if other than the date of filing: (optional)
	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 605.0207 (date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
	effective date on the Department of State's records.
record spec d is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	(C)11 17171
Dated	08/16/2021
	Mangelley Grande Domited
_	Signature of a member or authorized representative of a member
	4 A
	Murcela Gibvanni Deniciano Typed or printed name of signee