422000351950

(Re	questor's Name)	
(Ad	dress)	
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	100 100	10
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(LO	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiling Officer	
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Office Use Only



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09/19/22--01011--030 **25.00

LLC N/C Ameno



A. RAMSEY DEC 15 2022

COVER LETTER

`TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	UMPERS, LLC		•
SUBJECT:	Name of Lim	ited Liability Company	
791 - 1 - 1 - 2 - 1 - e		Salah Alian Bar	
	Amendment and fec(s) are sub	-	
Please return all correspo	ondence concerning this matter	to the following:	
	Izbeth Rivera		
		Name of Person	
	Jammin Jumper\$, LLC		
	-	Firm/Company	
	10640 nw 37th St #1		
		Address	
	Coral Springs, FL, 33065		
		City/State and Zip Code	
	izbeth.rivera@gmail.com	to be used for future annual report noti	ficultion t
For further information e	oncerning this matter, please c		i Kukai /
Izbeth Rivera		954 464-9322	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Unabound is a about the t	as fall mina manust		
Enclosed is a check for the \$25.00 Filing Fee	-	[] \$55.00 Ellian U.S. P.	Can no tillian Ess
= 525.00 Filing rec	☐ \$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 Addres	<u>s:</u>	Street Address:	
Registration 5	Section	Registration Sec	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

JAMMIN JUMPERS, LLC

2022 SEP 19 PM 12 25

If Changing Registered Agent, Signature of New Registered Agent

				11112 25
(<u>Name of the Limited L</u> (A F	iability Compa	ny as it now appe	ars'on our records	.)
			į	~ ~ ``
The Articles of Organization for this Limited Liabil	lity Company	were filed on	08/10/2022	and assigned
Florida document number L22000351950	 -	_		
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liab	ility company	<u>here</u> :	
Janumin Jumper LLC				
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	a •			
(Principal office address MUST BE A STREET A	DDKESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	<u>V)</u>			
		 .		
B. If amending the registered agent and/or regis	tered office a	iddress on our	records, <u>enter t</u>	he name of the new register
agent and/or the new registered office address ho	e <u>re</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Flo	orida street address	
			. Flor	rida
_		City		Zip Code
New Registered Agent's Signature, if changing Regis	stered Agent:			
		an to not in this	ramanta 16 m	ban and the same to the state of
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this char	nd complete ; ed agent as p stered office	performance o provided for in	f my duties, and Chapter 605, F	Ham familiar with and S. Or, if this document is

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			Remove
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			□Add
			□Remove
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			□ Change

Page 2 of 3

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	9/17 2022
	9/17 30 22. Tyuth R. Signature of a member or authorized representative of a member
	Izbeth Rivera
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00