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## **COVER LETTER**

· Division of	of Corporations	
SUBJECT:	JET BOY LLC	
Sobstice:	Name of Limited Liability Company	
The enclosed Article	eles of Amendment and fee(s) are submitted for filing.	
Please return all cor	orrespondence concerning this matter to the following:	
	Zachary Chin-Quee  Name of Person	
	Firm/Company	
	6440 NW 415T ST	
	Coral Springs, FL 33067  City/State and Zip Code  Jetboyllc @hotmail. Com  Firmail address: (to be used for future annual report notification)	22 SEP 14 AH 9: 57
	Jetboylic @hotmail. Com F-mail address: (to be used for future annual report notification)	
For further informat	ation concerning this matter, please call:	AH 9:
Zachary	Chin-Quee at 954 330 - 8824  Name of Person Area Code Daytime Telephone Number	9: <b>57</b>
Enclosed is a check	k for the following amount:	
□ \$25.00 Filing F	Fee S30,00 Filing Fee & S55,00 Filing Fee & S60,00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed)	f Status & py
Mailing A	Address: Street Address:  Wion Section Registration Section	

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

TO:

**Registration Section** 

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

JET BOY LLC

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number <u>L22000356538</u>	Company were filed on <u>August 12,2022</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and contain the words "Lim	ited 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 ADDI	(ESS)
	SEC
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	<b>5</b>
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the name of the new regis
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>	<u>Address</u>	Type of Action
AMBR	Zachary J. Chin-Quee	6440 NW 415T ST	SZ/Add
		Coral Springs, FL 33067	□Remove
			□ Change
			□Add
			□Remove
			22 SEP II AM 57
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n effective date is listed, the date must be speci- te: If the date inserted in this block does	fic and cannot be prior to date of:	filing or more than 90 days after	filing.) Pursuant to 6	05.0200 sted as
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cument's effective date on the Department country is effective date. It is filed.  September 10th Country is the country in the country is entired.			) The 90th day af	ler the