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TAI LAHASSEF, FL

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COVER LETTER

TO:	Registration S Division of Co					
SUBJI	FCT:	JABSAC PAI	NTING CLEANING LLC			
30001	<u>-</u>	Name of Lin	nited Liability Company			
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
			JOSE LEON			
			Name of Person			
		LBS LEG	ON BUSINESS SERVICES LLC			
			Address			
		ТА	MARAC, FLORIDA 33321			
			City/State and Zip Code			
			nfo@leonbusineservices.com			
		E-mail address: (to be used for future annual report notifica-	ation)	202 302 303	
For furt	ther information of	concerning this matter, please c	all:		ORE ORE	
	JOSE	LEON	954 323-9074		2024 DEC -3 SECRETARY TALLAHAS	·
	Name o	f Person		elephone Number	104 DEC -3 PH 4: 37 ECRETARY OF STATE TALLAHASSEE, FL	
Enclose	d is a check for th	he following amount:			: 37 TATI FL	'taut'
■ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing F Certificate of Certified Copy (additional copy i	Fee. Status &	

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

Street Address: 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

JABSAC PA	INTING CLEANING LLC		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears imited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Con	npany were filed on	09/07/2022	and assigned
Florida document number <u>L22000391027</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company here	<u>e</u> :	
JABSAC SERVICES LLC			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the des	ignation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
•			
<u>Principal office address MUST BE A STREET ADDRE</u>	<u> </u>		
Enter new mailing address, if applicable:			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		20; SE	
	·	.,	AL CR
B. If amending the registered agent and/or registered o	Mas address on our roo	auda autau tha nami	55
igent and/or the new registered office address here:	Three address on our rec	orus, <u>enter the han</u>	7.5
			SER PH
			SH F
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			111 -
New Registered Office Address.	Enter Florid	a street address	
		. Florida	
	City	, 1101104	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 **Title** Name <u>Address</u> Type of Action _____ Remove _____

Remove _____ Change _ Dremov23 DEC -3 PH TE STRemose _____ □Change □Add _____ Change Remove

_____ Change

THANK Y	OU.									
										
										
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ective date, effective date	If other thar is listed, the dat	n the date of f te must be specific	iling: _ c and can	not be prior	to date of fi	ling or more	(c than 90 days	optional) after filing.) I	ursuant to 605	.0207 (3
<u>te:</u> If the date	inserted in th	his block does n the Department	not meet	the applic	able statut	ory filing re	equirements	, this date w	ill not beliste	ed as the
amem s ence	tive date on t	ne Department	or State	s records.						
cord specifies	a delaved eff	fective date, but	t not an e	effective ti	me. at 12:	Ol a.m. on	the earlier o	f: (b) The	90th day after	r the
s filed.	,									
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