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(Requestor's Name)		
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(Busi	iness Entity Nar	me)
(Doc	ument Number)	<u> </u>
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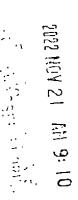
A. RIVERS

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COVER LETTER

TO:

TO: Registration So Division of Cor			
SURJECT: JAM P	lyings L.L.C		
Sobster. <u>G.1</u>	Vints L.L.C. Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jenna Muello	(
		Name of Person	
	JIM Prims LL	c	
		Firm/Company	
	1490 NE Dine T	skund Rd. SIG-E	
	11.19 14 0 1 11 0 3	Address	
		2	
	Carpe Concil, FC	3390 9 City/State and Zip Code	
	E-mail address:	to be used for future annual report not	ification)
For further information c	concerning this matter, please e	all:	
Para 103. wh		.020 Wa-Es	. ATT
Sennon Mame o	f Person	at (4 5 4) 900-70 Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	
P.O. Box 632 Tallahassee, l		The Centre of 7	
runanassee, i	1 L L L L L L L L L L L L L L L L L L L	ZHIO IV, IVIONEC	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J.M Prin	45 L.L.C			
(Name of the Lim	ited Liability Company as it now a (A Florida Limited Liability Comp	opears on our records.) any)		
The Articles of Organization for this Limited I	iability Company were filed o	n November 9,20	222 and ass	ignec
Florida document number L2200048 No	14			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability compar	<u>ıv here</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the	abbreviation "L.	L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
	•			
B. If amending the registered agent and/or	registered office address on o	ur records, enter the na	ıme of the nev	v regist
agent and/or the new registered office addre		· · · · · · · · · · · · · · · · · · ·		
N	Tarras Marshard		2022 NO	
Name of New Registered Agent:	Jerma Mueller	· · · · · · · · · · · · · · · · · · ·	0/2	
New Registered Office Address:	- 1490 NE Pine Is	Nava Rd. St.6- r Florida street address	<u> </u>	1
			A	111
	<u>Cape Corest</u>	, Florida _	339000	
New Registered Agent's Signature, if changing	•		5 Zip Gall	
Thereby accept the appointment as register.		this agragity I found to		.l

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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.

Actives Mullic
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Act
Mar	Maximilian & Muller	1490 NE Pine Istand Rd &	bbA□ £
		Cupe Coxul, Fl 33000	DRemove
		United States	□Change
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(If an effective date is listed, the date must be	te of filing: November 9, 3032 (optional) specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.026 does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
the record specifies a delayed effective da cord is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
Dated November 16	. <u>3033</u> .
——————————————————————————————————————	mature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00