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PICK-UP		MAIL
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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

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<u>PLEASE USE FUNDS FRO</u>	OM ACCT: 120210000160	AMOUNT: 25.00
AUTHORIZATION:	Jennes fill- L2200049011	3
Business Name		lumber, (if known):
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NEW FILINGS		<u>AMMENDMENTS</u>
Profit Not for Profit		<u>X</u> Amendment Resignation of R.A. Officer/Director
Limited Liability		Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger Conversion
CORP		Conversion
OTHER FILINGS	<u>REGI</u>	STERATION/QUALIFICATIONS
Annual Report		oreign filing .imited Partnership
Fictitious Name		einstatement
APOSTIL () Coun		Other
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EXAMINER'S INITIALS:_____

FLORIDA CAPITAL COURIER SERVICES. INC 2330 CLARE DRIVE TALLAHASSEE. FL 32309 (850) 524-5437 (850) 524-6243

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PLEASE USE FUNDS FROM	ACCT: 120210000160 AMOUNT: 25.00
AUTHORIZATION: Jaynin Enterprises, LLC Business Name	Jenes Lun- 1.22000490113 Document Number, (if known):
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other CORP	<u>X</u> Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTIL()Country	Other

EXAMINER'S INITIALS:_____

COVER LETTER

TO: **Registration Section** Division of Corporations

SUBJECT: Jaynin Enterprises, LLC

Name of Usinited Usability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael M. Bajalia, Esq.

Name of Person

Bajalia Law Office, P.A.

Firm/Company

11512 Lake Mead Ave., Suite 301 Address

Jacksonville, FL 32256

City/State and Zip Code

mbajalia@bajalialawoffice.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael M. Bajalia

Name of Person

at (<u>904</u>) <u>352-1121</u> Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

□X\$25.00 Filing Fee

□ \$30,00 Filing Fee & Certificate of Status □ \$55,00 Filing Fee & Centified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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 23.13

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ARTICLES OF AMI	ENDMENT	The second second
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ARTICLES OF ORG	ANIZATION	
OF		
Jaynin Enterprises, LLC (Name of the Limited Liability Company as h (A Florida Limited Liability	(now appents on our records.) y Company)	MILLING OF T
The Articles of Organization for this Limited Liability Company were	filed on <u>November 17, 2022</u> and ass	igned
Florida document number <u>1.22000490113</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liability c</u>	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Cor	mpany," the designation "LLC" or the abbreviation "L	I. C "
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	······································	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered office addre agent and/or the new registered office address here:	ss on our records, <u>enter the name of the new</u>	, registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
C. C	Tity 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 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

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Title	Name	Address	Type of Action
MGR	Salameh, Nina	13120 Mandarin Road	□Add
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