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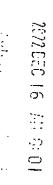
| (Requestor's Name) |
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| Special Instructions to Filing Officer: |
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| | Registration Se Division of Cor | | | | | | |
|-----------------|------------------------------------|--|---|---|--|--|--|
| SUBJEC" | JKGW HOLDINGS LLC | | | | | | |
| OBJEC | | Name of Limited Liability Company | | | | | |
| he enclo | sed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | | |
| leuse reti | um all correspo | indence concerning this matter | to the following: | | | | |
| | | Jacqueline Paulet | | | | | |
| | | | Name of Person | | | | |
| | | JKGW HOLDINGS LLC | | | | | |
| | | <u></u> | Firm'Company | | | | |
| | | 2185 SW 10th St. | | 2022 DEI | | | |
| | | | Address | | | | |
| | | Miami, Fl. 33135 | | , , , | | | |
| | | | City/State and Zip Code | | | | |
| | | Jacquelinepaulet001@gmai | Leom to be used for future annual report notification) | | | | |
| or furthe | er information c | oncerning this matter, please of | | ;. - | | | |
| iacquelin | e Paulet | | 786 486-5997 | | | | |
| | Name o | f Person | Area Code Daytime Telephone | e Number | | | |
| Enclosed | is a check for th | ne following amount: | | | | | |
| ≅ \$25.0 | 00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is enclosed) | 60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose | | | |

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 M. Manney Strand Cuita SIA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| JKGW HOLDINGS LLC | <u></u> |
|---|---|
| (<u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili | it now appears on our records.) ny (Company) |
| The Articles of Organization for this Limited Liability Company were florida document number $\frac{1.22000505751}{1.00000000000000000000000000000000000$ | : filed on and assigned |
| his amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability | company here: |
| The new name must be distinguishable and contain the words "Limited Liability Co | |
| Enter new principal offices address, if applicable: | 2022 |
| Principal office address MUST BE A STREET ADDRESS) | 262): CED 1 |
| | · · · · · · · · · · · · · · · · · · · |
| Enter new mailing address, if applicable: | |
| Mailing address MAY BE A POST OFFICE BOX) | <u> </u> |
| | an our reports anter the name of the new regists |
| B. If amending the registered agent and/or registered office addr agent and/or the new registered office address here: | ess on our records, enter the name of the new registe |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| INCOME THE PROPERTY. | Enter Florida street address |
| | . Florida |

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.

City

Zip Code

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 |
|--------------|----------------|------------------|----------------|
| VP | NEREIDA NEGRIN | 2185 SW 10th St. | ≣ Add |
| | | Miami, FL 33135 | □Remove |
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| ive date, if other the fective date is listed, the late inserted ment's effective date. | in this block does | not meet the ap- | plicable statuto | ng or more than 9 ry filing require | 0 days after fil ments, this d | ing.) Pursu ate will no | ant to 605.0 of he listed |
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