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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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| | Division of | Corporations | | D |
| | Fax Number | : (850)617-6383 | | EC |
| | From: | | | 2022 DEC 22 |
| | | E : LEGALZOOM.COM INC. | | |
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| | • | illings. Enter only one | ewall address bisase | , |
| | Email Address: | RESTATE/CORRECT | OR M/MG RESIG | |
| ī 5 | Email Address: LLC AMND/R | RESTATE/CORRECT JUMP SERVE, PL | OR M/MG RESIG | |
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Corporate Filing Menu

Electronic Filing Menu

Help

TO:

P.O. Box 6327

Tallahassee, FL 32314

Registration Section

COVER LETTER

| Division of C | orporations | | | |
|---------------------------|---|--|---|--------|
| JUMPS | ERVE, PLLC | | | |
| SUBJECT: | Name of Limited Liability Company | | | |
| | | | | |
| The enclosed Articles of | of Amendment and fee(s) are sub- | nitted for filing. | | |
| Please return all corresp | oondence concerning this matter t | o the following: | | |
| | Cheyenne Moseley | | | |
| | | Name of Person | | |
| | Legalzoom.com, Inc. | | | |
| | | Firm/Company | | |
| | 101 N Brand Blvd 11th Fl | | | |
| | | Address | | |
| | Glendaie, CA 91203 | | | |
| | | City/State and Zip Code | | |
| | lynda@gowing.us E-mail address: ti | o be used for future annual r | report notification) | |
| For further information | concerning this matter, please ca | | | |
| Cheyenne Moseley | | 800 77. | 3-0888 | |
| Name | of Person | at () Area Code | Daytime Telephone Number | |
| Enclosed is a check for | the following amount: | | | |
| □ \$25.00 Filing Fee | ☐ \$30.90 Filing Fee & Certificate of Status | ■ \$55.00 Filing Fee & Certified Copy (additional copy is encl | Certificate of Sta | itus & |
| Regis | LING ADDRESS: tration Section ion of Corporations | Registrati | COURIER ADDRESS: on Section of Corporations | |

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 DEC 22 AM 11: 27

| (<u>Name of the Limited Liab</u> (A Flori | ultry Company as it now appears on our re ida Limited Liability Company) | cords.) |
|---|---|-----------------------------------|
| The Articles of Organization for this Limited Liability Plorida document number 1.22000524288 | Company were filed on 12/14/2022 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lin | mited liability company here: | |
| JUMP SERVE, LLC | | |
| The new name must be distinguishable and contain the words "Li | imited 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 ADL | ORESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| 3. If amending the registered agent and/or reg | istered office address on our reco | ords, enter the name of the |
| egistered agent and/or the new registered office ad | | Auto the name of the |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| - 12-20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | Enter Florida street ad | dew |
| | | . Florida |
| | City | Zw 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, E.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:

2022-12-22 11:29:36 PST

MGR = Manager

To:

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|----------------------|--|----------------|
| AMBR | PASHO-GOWING L. YNDA | | |
| | | 2499 CULBREATH RD BROOKSVILLE, FL 34602 | ■ Remove |
| | | | Change |
| AMBR | Lynda Pasho-Gowing | 2499 Culbreath Rd. Brooksville, Florida 34602 | Add |
| | | | □ Remove |
| | | | C'hange |
| | | | |
| | | | □ Remove |
| | | | Change |
| | | | D Add |
| | | | ☐ Remove |
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2022-12-22 11:29.36 PST

LegalZoom com, Inc. 13526419646

From: Sylvia Paul From: Lyndo Pesno-powing

To: LegalZoom, Inc.

Page, 5 of 9

Lynda Pasho-Gowing

2022-12-20-21-26:52 GMT

D. If amending any other information, enter change(s) here: Attach additional sheets, if necessary.)

2022 DEC 22

4411: 27 E. Effective date, if other than the date of filing: ___ (lenoitqo)_ (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing (Pursuant to 605 0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the document's effective date on the Department of State's records If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. December 20 3032.

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Lyped or printed name of signee

or authorized representative of a member

Filing Fee: \$25.00