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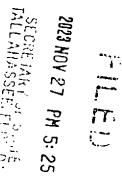
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	ICE TEAM LLC Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	WILLIAM M. STRANGE			
	-	Name of Person		
	WS BUSINESS CENTER	CONSULTING INCV		
		Firm/Company		
	6165 PLANTA LANE			
		Address		
	WEST PALM BEACH, FI	. 33415		
		City/State and Zip Code		
	williamstrangep@hotmail.c			
	E-mail address: (to be used for future annual report not	(fication)	
For further information c	oncerning this matter, please c	all:		
WILLIAM M. STRANGE		305 582-1788 at () Area Code Daytin		
Name of Person		Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addres</u>		Street Address:		
Registration Section		Registration Se		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, I			be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVS SERVICE TEAM LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{01/03/2023}{1}$ and assigned Florida document number 1.23000005548 This 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 Company," the designation "LLC" or the abbreviation "L.L.C." 3874 LYONS RD # 207 Enter new principal offices address, if applicable: COCONUT CREEK, FL 33073 (Principal office address MUST BE A STREET ADDRESS) 3874 LYONS RD # 207 Enter new mailing address, if applicable: COCONUT CREEK, FL 33073 (Mailing address MAY BE A POST OFFICE BOX) Ċ

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

	City	Zip Code
	COCONUT CREEK	, Florida ³³⁰⁷³
New Registered Office Address:	Enter Flori	da street address
New Registered Office Address:	3874 LYONS RD # 207	
Name of New Registered Agent:	JHOJAN J. LOZADA	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WILLIAM VALDERRAMA	4079 ALLERDALE PL	
		COCONUT CREEK, FL 33073	■Remove
			Change
MGR	JHOJAN J. LOZADA	3874 LYONS RD # 207	□ Add
		COCONUT CREEK, FL 33073	
			■ Change
MGR	LAURA V. VALDERRAMA	3874 LYONS RD # 207	
		COCONUT CREEK FL, 33073	□Remove
			🗆 🗸 🗆 🗸
			□Remove
			□Change
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an effective date is listed, the date must book of the date inserted in this block	specific and cannot be p	rior to date of filing	or more than 90 days a	fter filling.) Pursua this date will no	int to 605.0207 it he listed as
ocument's effective date on the Depa					
record specifies a delayed effective d Lis filed.	ate, but not an effectiv	re time, at 12:01 a	.m. on the earlier of:	(b) The 90th (day after the
in med.					
ated NOVEMBER 20	2023				
•		مراكسور المسمر			
	gnature of a member or a	DLACEL		_ .	

Filing Fee: \$25.00