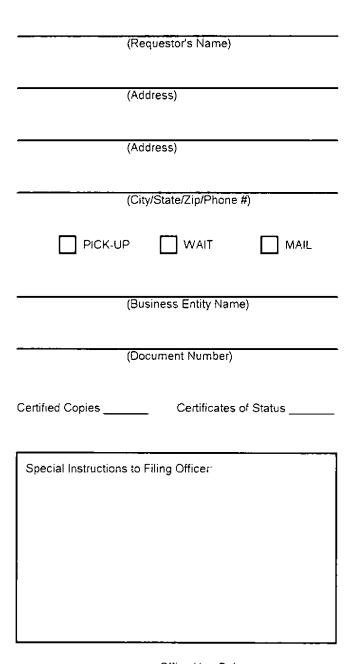
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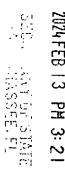
Office Use Only





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COVER LETTER

	egistration Sec vision of Corp					
CHBIPPE		apes with LJ LLC				
Name of Limited Liability Company						
The enclose	ed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspon	ndence concerning this matter	to the following:			
		LaTonya Jackson				
Name of Person						
Firm/Company						
14410 77th Place North						
Address						
		Loxahatchee, FL 33470				
	City/State and Zip Code					
endlessescapeswithlj@gmail.com E-mail address: (to be used for future annual report notification)						
				on nouncation)		
For further	information co	oncerning this matter, please co	all:			
LaTonya Ja	ickson		321 236-0 at ()	0034		
Name of Person				Daytime Telepho	ne Number	
Enclosed is	a check for th	e following amount:				
₩ \$25,00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Endless Escapes with LJ 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 1/12/23 and assigned Florida document number L23000026613 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LJ & Co. Enterprises LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 11987 Southern Blvd #1025 Enter new principal offices address, if applicable: Royal Palm Beach, FL 33411 (Principal office address MUST BE A STREET ADDRESS) 11987 Southern Blvd #1025 Enter new mailing address, if applicable: Royal Palm Beach, FL 33411 (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: 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.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(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 listed 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. Dated _ 2024 Signature of a member or authorized representative of a member LaTonya C. Jackson Typed or printed name of signee

Filing Fee: \$25.00