L2300059(07)

(Requestors Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Se usial Instructions to Filing Officer.
J. HORNE FEB 17 2023
Office Use Only



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02/17/23--01001--013 **30.00



COVER LETTER

PO: Registration S Division of Co			•
JUMACO.			
SUBJECT:	Name of Limited Liability Company		
TN 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		to the last	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Logan Parker		
		Name of Person	
	Bass Sox Mercer		
		Firm/Company	
	2822 Remington Green Ci	rele	
		Address	
	Tallahassee, Florida 32308	3	
		City/State and Zip Code	
	lparker@bsm-law.com	· · · · · · · · · · · · · · · · · · ·	
For further information of	n-mail address: t concerning this matter, please c	to be used for future annual report in all:	otification)
Logan Parker		850 878-6404	
Name (of Person	at () Area Code Davt	ime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	Continu
Registration Section		Registration S Division of C	
Division of Corporations P.O. Box 6327		The Centre of	
Tallahassee.			roe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



JUMACO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	were filed on 02/08/2023	and assigned
Florida document number L23000059607		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
JMCX, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "	LLC" or the abbreviation "L.L.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)		
T) 16 11 41 12 1 1 1 1 1 1 1 65 1	ddress on our records, en	ter the name of the new registered
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:		
agent and/or the new registered office address here:		
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street aa	ldress
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street aa	
name of New Registered Agent: New Registered Office Address:	Enter Florida street aa	dress . Florida Zip Code
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street aa	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
		□Remove	
		□Change	
			□Add
			□Remove
			□Change
		□ Add	
			□Remove
			□Change
			□Add
		□Remove	
			□Change
			🗆 Add
			□Remove
			Elek.

. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
<u>No</u>	ective date, if other than the date of filing:
	cord 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 stilled.
Dat	ed February 16 . 2023
	Signature of a member or authorized representative of a member Logan Parker
	Typed or printed name of signee

Filing Fee: \$25.00