(((H24000198804 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600

Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIERRA JONES ENTERPRISES LLC

Certificate of Status	0
Certified Copy	1
l'age Count	05
Estimated Charge	\$55.00

M. SOLOMON

JUN - 6 2024

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Help

### **COVER LETTER**

TO:	Registration So Division of Cor		•	* /	<b>₹</b>			
SURT	SIERRA K	ONES ENTERPRISES LLC						
SUBJECT: Name of Limited Liability Company								
		Amendment and fee(s) are sub	-					
		Cheyenne Moseley						
			Name of Person					
		Legalzoom.com, Inc.			_			
			Firm/Company		2024			
101 N Brand Blvd 11th Fl								
			Address		UN -6 P			
		Glendale, CA 91203						
toriJ34@jonesenterprises.or		torij34@jonesenterprises.or	City/State and Zip Code		2:31 LAI C Colle			
		E-mail address: (	to he used for future annual report notif	fication)				
For fur	ther information c	oncerning this matter, please ca	all:					
Cheye	nne Moseley		800 773-0888 at ()					
	Name o	f Person		e Telephone Number	_			
Enclos	ed is a check for th	ic following amount:						
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing I Certificate of Certified Cop (additional copy	Status & y			
		ING ADDRESS: ation Section	STREET/COURI Registration Sectio					

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

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

company has been notified in writing of this change.

#### From: Michael Matheny

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company)	<b>.</b>		
The Articles of Organization for this Limited Liability Company	and assigned			
Florida document number L23000173432				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
<u></u>				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	5709 Beaverbrook St.	5.00 20		
(Principal office address MUST BE A STREET ADDRESS)	Cocoa , FL 32927	HE UN		
		<u> </u>		
		78 to		
Enter new mailing address, if applicable:	5709 Beaverbrook St.			
(Mailing address MAY BE A POST OFFICE BOX)	Cocoa , FL 32927	5		
		5m 3		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		enter the name of the nev		
New Registered Office Address:	New Registered Office Address:  Enter Florida street address			
	da			
	City	Zip Coxle		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and	l I am familiar with and		

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

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	Sierra V. Jones		□ Add
			□ Remove
		5709 Beaverbrook St. Cocoa , FL 32927	<b>■</b> Change
AMBR	Heidi L. Menefee		
		382 NE 191ST St. #171067 MIAMI, FL 33179	■ Remove
			Change
	<u> </u>		
			Remove JUH - 6 PH 2: 31
			□ Emilye = 3
			Change
			□ Remove
			☐ Change
			□ Remove
			☐ Change

Page 3 of 3

Typed or printed name of signce

Signanye of a

Sierra Jones

prember or authorized representative of a member

Filing Fee: \$25.00