

L23000176160

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(Address)

(Address)

(City/State/Zip/Phone #)

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2023 OCT 10 AM 11:27

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FBI - NEW YORK
OCT 10 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

JNM CF PARTNERS LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN MALONE

Name of Person

ANOMALY CPA

Firm/Company

22 Boston Wharf Road, 7th Floor

Address

Boston MA 02210

City/State and Zip Code

JOHN@ANOMALYCPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN MALONE

781

694-2203

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



Anomaly CPA
22 Boston Wharf Road, 7th Floor
Boston, MA 02210
(781) 694-2203
www.anomalycpa.com

October 4, 2023

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: JNM CF Partners LLC
Articles of Amendment

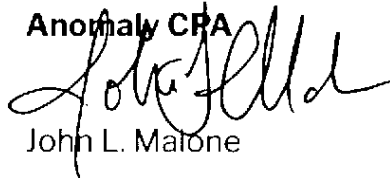
Dear Sir or Madam,

I hope this finds you well. Enclosed please find the following for filing:

- Executed Articles of Amendment; and
- Check for Filing Fee.

Should you have any questions or need anything further, please contact my office.

Regards,

Anomaly CPA

John L. Malone

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

JNM CF PARTNERS 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 04/10/2023 and assigned
Florida document number L23000176160

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JNM Cabinetry LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1719 S Hubert Ave. Tampa, FL 33629

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1719 S Hubert Ave. Tampa, FL 33629

(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:

1719 S Hubert Ave.

Enter Florida street address

Tampa

City

Florida

33629

Zip 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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MASTER, JITEN	3023 Eastland Blvd, Suite 122, Clearwater, FL 33761	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	SKIJUS, NICHOLAS	1719 S Hubert Ave, Tampa, FL 33629	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MASTER, MILAN	3023 Eastland Blvd, Suite 122, Clearwater, FL 33761	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 OCT 10 AM 11:27

2023 OCT 10 AM 11:24

(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)

Dated 8/1/23,

Signature of a member or authorized representative of a member

NICHOLAS SKIJUS

Typed or printed name of signee

Filing Fee: \$25.00