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Y. SCOTT OCT 2 2 2023

COVER LETTER

TO: Registration S Division of Co				. • <i>,</i>	
SUBJECT: TH		GROVE LLC	, 		
	Name of Earl	ned Entering Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:		, 202	
	JATINDE	R BHAN		SECRETA ISION OF	
		Name of Person		LED CORF	
				D OF STA (PORAL	ranto 9
		Firm/Company		RATIONS	14 /4 .
	10502 LE	ENNEU GLEN (
		Address			
	JACUSONU	ILLE, FLORI	DA, 3 225	6	
		City/State and Zip Code			
	E-mail address: (1 C GMALL. CON	Y) ification)		
For further information (concerning this matter, please c	all:			
JATINDER	2 BHAN	904, 955	- 1746		
Name (of Person	Area Code Daytin	ne Telephone Number	_	
The American American Const	L 0 11				
Enclosed is a check for t				•	
□\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status & v	
Mailing Addre Registration		<u>Street Address:</u> Registration Se	ection		

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE LEVEDRITY GRO (Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.	
The Articles of Organization for this Limited Liability Company Florida document number <u>L2700019117</u> 7	were filed on APRIV 12, 20	>>2 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil. THE JBSD GROU The new name must be distinguishable and contain the words "Limited Liabil."	P LLC	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		SE DIVIS 2023
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		CRETARY OF STATE
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	me of the new registered
Name of New Registered Agent: New Registered Office Address:	Enter Nortda street address	
	City Florida	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 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>	Type of Action
			□Remove
			□Change
			□Add
			SEE F Lings 2023 OCT
			SERRETARE OF STATE 2023 OCT PH 3: 35
			PH 3: 35
			Remove
			Change
			□Add
			□Remove
			□Change
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			□Remove
			☐ Change
			□Remove
			Change

If amending any other information, enter change(s) here: (Attach additional sheets, if nec	vessary.)
	
	
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	STATE RAFIGN 3: 35
	SS IGNS
Effective date, if other than the date of filing: 10 06 2023 (opt (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days afte Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	ional) er filing.) Pursuant to 605,0207 (? iis date will not be listed as th
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (cord is filed.	b) The 90th day after the
Dated 10 4 2023	<u> </u>
Signature of a member or authorized representative of a member	
JATINDER BHAN Typed or printed name of signee	