## L23000197723

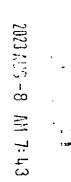
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## **COVER LETTER**

TO: Registration So Division of Co		. •	
SUBJECT:	<del>_</del>	INVESTMEN ited Liability Company	TS LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	MART	IN FERNAND Name of Person	DEZ
	JUMA	R INVESTME Firm/Company	NTS
	259 NE 41	Address	
	MIAMI, F	L 33137 City/State and Zip Code	<del></del>
		•	SEGMAIL.COM
For further information (	concerning this matter, please c	all:	
MARTIN FE	of Person	at ( <u>786</u> ) <u>853</u> Area Code Daytim	- 9845 e 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 radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration Division of C	Section	<u>Street Address:</u> Registration Sec Division of Cor	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUMAR INVESTMENTS LLC

2023755-8 AH 7:43

(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 APOIL 20, 2023 and assigned Florida document number <u>L23000197723</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) 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 \_\_\_ City

## 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>	Address	Type of Action
AMBR	MARTIN FERNANDEZ	259 NE 46 TH ST.	<b> X</b> Add
AP		MIAMI, FL 33137	
		<u> </u>	
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an effecti <u>ote:</u> If t	ive date is listed. ( the date inserte	r than the date the date must be sp d in this block do te on the Departn	ecific and can oes not meet	not be prior to o the applicabl	late of filing or m	ore than 90 days g requirements	after filing.) Purs	uant to 605.0207 ( not be listed as t
record sp is tiled.		ed effective date	, but not an e	effective time	, at 12:01 a.m.	on the earlier (	of: (b) The 90t	h day after the
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