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## **COVER LETTER**

TO: Registration Sec Division of Corp			t
SUBJECT:	Name of Lim	Jab-PMent	lomes LLC
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Hourd 1	Name of Person	<u></u>
		Firm/Company	2023 OCT
	11277 C	MSH FLEN	
	0/1/0/0	City/State and Zip Code	74 PH 2:2
	E-mail address: (	5 AUCUS + D. O to be listed for atture annual reportmotif	Mail Court
For further information c	oncerning this matter, please c	alt:	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	ction
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632	.7	The Centre of T	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liabi	JAH EM QWH	- HOMOS	<u>LLC</u>	_
(A Flori	da Limited Liability Company)			
The Articles of Organization for this Limited Liability Florida document number <u>L2300622</u>	Company were filed on 11- -0.7-8-7	-22-2016	_ and assig	gned
This amendment is submitted to amend the following:	(Name of the Limited Liability Company est those appears on our records.) (A Honda Limited Liability Company)  icles of Organization for this Limited Liability Company were filed on 1 - 22 - 20   6 and assigned document number 2 - 23 - 0.62 - 20 . 7.8.7.4  mending name, enter the new name of the limited liability company here:  manner must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" new principal offices address, if applicable:  pal office address MUST BE A STREET ADDRESS)  mending address, if applicable:  pag address MAY BE A POST OFFICE BOX)  mending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address			
A. If amending name, enter the new name of the lin	nited liability company here	<u>2</u> :		
The suppose and the distinguishable and contain the words."	imited Liability Company "the desi	enation "LLC" or the abbra	viation "L.L.	.C."
The new frame mast be distinguishable and contain the words. Li	mined radiately company, are desi	Giation in the average	2	
Enter new principal offices address, if applicable:			723	
(Principal office address MUST BE A STREET ADI	ORESS)	; ; ; ; ; ; ; ; -	<u> </u>	
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(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	[1]	<u>o</u>	
			<del></del>	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our rec ;	ords, <u>enter the name</u>	of the new	registered
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	a street address	. <del></del>	
		Florida		
<del></del>	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  of Organization for this Limited Liability Company were filed on 1 22-2016 and assigned ment number 22006220.7-8-7  ment is submitted to amend the following:  ling name, enter the new name of the limited liability company here:  must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" rincipal offices address, if applicable:  Tice address MUST BE A STREET ADDRESS)  inailing address, if applicable:  ling the registered agent and/or registered office address on our records, enter the name of the new register the new registered office address here:  me of New Registered Agent:  we Registered Office Address:			

## New Registered Agent's Signature, if changing Registered Agent:

A

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
MAR	Joshua Augusto	1/227 crysp/ahr+ Orlando FG 37.837	🗆 Add
		Orlando F1 37.837	Remove
	$\cap$	-	□Change
MbR	Pierre Augusto	11227 (ASHR6/m 01/2010 P/ 3283	□Add
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in effective date is listed, the date mus ote: If the date inserted in this blo	t be specific and	cannot be prior	to date of filing of able statutory f	or more than 90 da iling requiremen	vs after filing.)	Pursuant rill not b	to 605.02 c listed
cument's effective date on the De	epartment of S	tate's records.	·				
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