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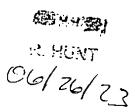
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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Corp	orations				
SUBJECT: AJH PRIOR	ITY SERVICE LLC				
SUBJECT: MATERIAL	Name of Limit	ed Liability Company	·		
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.			
Please return all correspor	idence concerning this matter t	o the following:			
	Shonnikkia Francois				
		Name of Person			
	AJH PRIORITY SERVICE	3 LLC			
		Firm/Company			
	4661 NW 10TH CT E202			r r	رب ب د
		Address			¹³ 26
	PLANTATION, FL 33313			388 30,5	PH
	ajhpriorityservice@gmx.co	City/State and Zip Code		EST.	7: 09
	E-mail address: (to be used for future annual report noti	fication)	H.	9
For further information co	oncerning this matter, please ca	all:			
Shonnikkia Francois		at () 9544519978	-321-34	1-954	[]
Name o	f Person	Area Code Daytim	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)	Certified	te of Stati	
Mailing Addres Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Se Division of Co The Centre of	rporations		
Tallahassee.			e Street, Suite 8	310	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AJH PRIORITY SERVICE LLC			
(Name of the Limit	ed Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on 05/	/22/2023	and assigned
Florida document number 1.23000251074			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company he	ere:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the d	esignation "LLC" or the abb	
Enter new principal offices address, if applic	eable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
			5 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			5
Enter new mailing address, if applicable:			PH 7:
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		PH 9
			<u></u>
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our r ess here:	ecords, <u>enter the name</u>	e of the new registere
Name of New Registered Agent:	Shonnikkia Francois		
New Registered Office Address:	4661 NW 10TH CT E202		
	Enter Flo	rida street address	
	PLANTATION	, Florida ³³³	313
	City		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.

My Milhan Mun Shon Haid Train
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>	Name	Address	Type of Action
MGR	Shonnikkia Francois	4661 NW 10TH CT E202	
MGR Shonnkkkia Francois	PLANTATION, FL 33313	□Remove	
			□ Change
	Shonnkkkia Francois	4661 NW 10TH CT E202	□Add
		PLANTATION, FL 33313	Remove
			Change
			□Add
			□Remove
			□Change
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			\ \ Add
			Remove
			_ □Change

Effective date, if other than the date of filing: [Optional] [In a effective date is listed, the date must be specific and camoot be prior to date of filing or more than 90 days after filing.] Pursuant to 60 Note: [In the date insterted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled. [In record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled.	amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)	
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Signature of a member or authorized representative of a member		of: (b) The 90th day a	fter the
Signature of a member of authorized representative of a member	Dated 6/22/3033		
	Signature of a member of authorized representative of a member		
Shonnikkia François Typed or printed name of signee	Shonnikkia Francois		

Filing Fee: \$25.00