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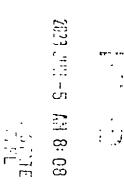
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COVER LETTER

TO: Registratio Division of	n Section Corporations	• •	
	ARS - CPA LLC		
SUBJECT:	Name of Li	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.	
Please return all corr	espondence concerning this matte	r to the following:	
		Albin Eberwein	
		Name of Person	
		Firm/Company	
	88.	3 Carmen Hernandez street	
		Address	2921
		San Juan, PR 00924	
		City/State and Zip Code	i い
	C	albinpr@gmail.com (to be used for future annual report notificatio	n)
Eve fresh as in frances		·	· · · · · · · · · · · · · · · · · · ·
	on concerning this matter, please		년 문 9
-	in Eberwein	787 407 - 2006 at ()	
Na	me of Person	Area Code Daytime Tele	phone Number
Enclosed is a check (for the following amount:		
□ \$25.00 Filing Fe	e □ \$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)
_	on Section of Corporations	Street Address: Registration Section Division of Corpora	tions
	ee, FL 32314	The Centre of Tallah 2415 N. Monroe Str Tallahassee, FL 323	eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JPIZARS - CPA LLC		
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	
The Articles of Organization for this Limited Liability Company were fi		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	mpany here:	
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abl	breviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS)		20
	-	<u> </u>
Enter new mailing address, if applicable:		Ċ1
Mailing address MAY BE A POST OFFICE BOX)		. 查
	•	
		<u> </u>
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	s on our records, <u>enter the nam</u>	e of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
Cit	'i'	Zip Code

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

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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>	Address	Type of Action
MGR	ALBIN EBERWEIN	1722 SHERIDAN STREET UNIT 137	🗀 Add
		HOLLYWOOD, FL 33020 US	≡ Remove
			☐ Change
			
			□Remove
			Change Change Change Change Change Change
			☐Remove ☐Remove ☐ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
			Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this locument's effective date on the	nust be specific and cannot be block does not meet the ap	prior to date of filing or mor pplicable statutory filing		ing.) Pursua		
record specifies a delayed effect I is filed.	ive date, but not an effecti	ive time, at 12:01 a.m. or	the earlier of: (b)	The 90th	day after	the
JUNE I	2023					
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	ant Es	mila				•
	Signature of a member or	authorized representative o	f a member		1	•
			f a member		d _i	•
			f a member	·	-5 M I	•
		authorized representative of Ebercuein printed name of signee	f a member		J:	•

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Filing Fee: \$25.00