L23000319813

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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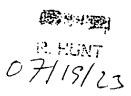
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IMPORTANT NOTICE

PLEASE SEND ALL DOCUMENTS – LAND APPROVED OR REJECTED TO THE ADDRESS BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Wednesday, July 12, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: JKENMARKET, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502 Registration Section

TO:

COVER LETTER

Division of Corp	ogrations		
SUBJECT: <u>JKENMA</u>		ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Corpor	ate Maintenance Le	ad
	Proc	essing Department	
	1	450 Vassar St	رون المراز المراز
		Address	
		Reno, NV 89502	9 PM 7: 12
		City/State and Zip Code	7: 12 TATE FL
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please ca	all:	
Processi	ng Department	at (800) 638-2320	
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	e following amount:		
2 \$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)
Registr Divisio P.O. Bo	NG ADDRESS: ation Section in of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JKENMAR		
(Name of the Limited Liability Compa (A Florida Limited I	ny as It now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 07/05/23	and assigned
Florida document number L23000319813		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<u>llity company here:</u>	
JKEN BOUT	IQUE, LLC	·
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6652 S Highway 1	
(Principal office address MUST BE A STREET ADDRESS)	Port Salnt Lucie, FL 34952	· · · · · · · · · · · · · · · · · · ·
		SS 9 : 11
Enter new mailing address, if applicable:		照 是
(Mailing address MAY BE A POST OFFICE BOX)		7: 1 5 TA
		2
		,
B. If amending the registered agent and/or registered of	· —	er the name of the ne
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent;		
Name of Now Registered Figure,		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	, Florida	
	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.

If Changing Registered Agent, Signature of New Registered Agent

|--|

15°. 12. 20°23 9:40AM No. 6177 F. 3

If amending Authorized Person(s) authorized to manage, enter the fitle, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			☐ Remove
			Change
			
			☐ Remove
			Q-Change
			Change PMAdd 112
			FL ZRemove
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			Remove
			D Change
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Please amend business purpose t	o: Retail and clothing			_
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ffective date, if other than the date of filing: N/A	(0	ptional)		
an effective date is listed, the date must be specific and cannot be pinote: If the date inserted in this block does not meet the app				
locument's effective date on the Department of State's reco		, tills date will	not be u	sieu as
e record specifies a delayed effective date, but	not an effective time, at 12:0)1 a.m. on	the ear	lier of
The 90th day after the record is filed.				
41.0/00				
Pated $\frac{7/12/23}{}$	·			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00