

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to running officer.

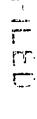




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SECRETARY OF STATE





COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Cor			
FJS Group SUBJEČT:			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Paola C. Vergara		
		Name of Person	
	Cohen Legal Group P.A.		
		Firm/Company	.
	1792 Bell Tower Lane		
		Address	
	Weston, FL 33326		
		City/State and Zip Code	
	pvergara@cohenlegalgroup		
		to be used for future annual report n	otification)
For further information of	concerning this matter, please c	all:	
Paola C. Vergara		954 297-4760 at ()	
Name o	of Person	Area Code Dayt	ime 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 (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration Division of C		Registration S Division of C	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FJS Group LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited I lorida document number L23000325010		were filed on July 10, 2023	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liab	ility company here:	
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
inter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
			2023 SLC TALLL
nter new mailing address, if applicable:			JUL 3
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			Fronti
 If amending the registered agent and/or gent and/or the new registered office addr 		address on our records, <u>e</u>	nter the name of the new register
Name of New Registered Agent:	Cohen Legal G	roup P.A.	
New Registered Office Address:	1792 Bell Tow	er Lane	
		Enter Florida street a	ddress
	Weston		, Florida <u>33326</u>
		Cin	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

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	FJ Transport23 Inc.	640 W 18st Unit 303	⊆ Add
		Hialeah, FL 33010	□Remove
AMBR	Juan Luis Murillo Alfaro	6991 NW Avc. #5	□Add
		Miami, FL 33166	≅ Remove
			□Change
AMBR	Maria Jose Orozeo Obando	6991 NW Ave. #5	□Add
		Miami, FL 33166	≡ Remove
			□Change
			□Add
			Remove
			□Change
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	her than the date	e of filing:	0/2023		(optional)	
ective date, if o	erted in this block o	does not meet the	e applicable statut	iling or more than 90 tory filing requirer) days after filing.) nents, this date v	Pursuant to 605.0207 vill not be listed as
n effective date is list ote: If the date ins	data an tha Danger	tment of State's	records.			
n effective date is lis ite: If the date ins	date on the Depart					
n effective date is lis o <u>te:</u> If the date ins cument's effective		te but not an effe	ective time, at 12:	Olam on the ear	lier of: (b) The	90th day after the
n effective date is lis ote: If the date ins cument's effective ecord specifies a d	elayed effective dat	te, but not an effe	ective time, at 12:	01 a.m. on the ear	lier of: (b) The	90th day after the
n effective date is lister If the date insecument's effective ecord specifies a distilled.		te, but not an effe	ective time, at 12:	01 a.m. on the ear	lier of: (b) The	90th day after the
n effective date is lister If the date insecument's effective ecord specifies a distilled.		te, but not an effort	23	01 a.m. on the ear	lier of: (b) The	90th day after the
n effective date is lis <u>ste:</u> If the date ins cument's effective		te, but not an effo	ective time, at 12:	(t) a.m. on the car	lier of: (b) The	90th day after the

Filing Fee: \$25.00