L23000337023

(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:				

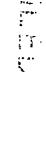
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COVER LETTER

		,	
SUBJECT:	JR RIS	ING LLC ited Liability Company	 .
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	R	1th astle	····
Division of Corporations DBJECT:			
	38		Drive
	Umatil	la FL 3278	74
	E-mail address: (na castle 2@q	mail.com
For further information con	cerning this matter, please ca	all:	
Ruth Name of P	Castle		7-8811 Telephone Number
Enclosed is a check for the	following amount:		
S25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			
Registration Sec		Registration Sec	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on $\frac{7/17/23}{L23000337023}$ and assigned
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: 38338 Timber lane Drive
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 38338 Timber (ane Drive) 1 2784
(Mailing address MAY BE A POST OFFICE BOX) Imatila, FL 32784
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here:
Name of New Registered Agent: Ruth Castle
New Registered Office Address: 38338 Timber lane Drive Emer Florida street address
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.

f Changing Registered Agent, Signature of New Registered Agent

PM 5: 1

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
			□Add
			Remove
			□Change
			□Add
		□Remove	
		□Change	
		∐Add	
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	→ D//	2023
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		- -
Effective date, if other than the date of filing:	(optional)	
f an effective date is listed, the date must be specific and cannot be prior to date of filing Note: If the date inserted in this block does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant y filing requirements, this date will not b	6 605,0207 e listed as
document's effective date on the Department of State's records.		
e record specifies a delayed effective date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day	v after the
rd is filed.	•	
5.1 1.0 1 7.2.2		
Dated September 2023.		
Duth Castle	J	
Signature of a member or authorized representation	ntative of a member	