

To:

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2025-01-16 05:24:08 UTC+14

18506176383

From: ZenBusiness User

L23000410127

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : I20230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

2025 JAN 15 PM 2:55
ATLANTA, GA

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JAG143 LLC**

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

K. SALY

JAN 16 2025

H25000017548 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

From: ZenBusiness User

FILED

2025 JAN 15 PM 2:55

ALLAHABAD, FLA

JAG143 LLC

(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 09/01/2023 and assigned
Florida document number 123000410127

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DLG143 LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8897 Byrom Campbell Rd Pace, FL 32571

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

8897 Byrom Campbell Rd Pace, FL 32571

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office 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

To:

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From: ZenBusiness User

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Jeffery Gray		<input type="checkbox"/> Add
		4280 WHITE ROAD MILTON, FL 32571	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Denise Gray	8897 Byrom Campbell Rd Pace, FL 32571	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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