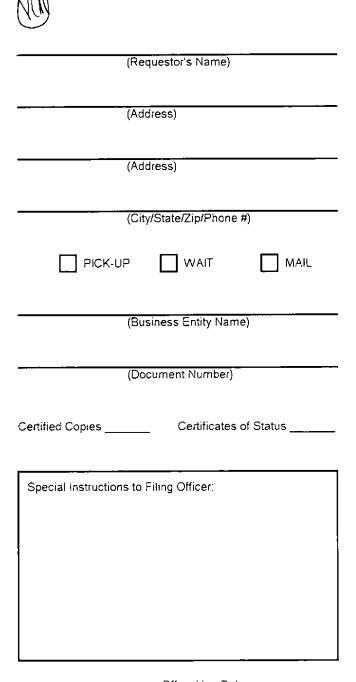
## L23000417933



Office Use Only



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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration So Division of Cor				
	TANS_3, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
<b>m</b>				
	Amendment and fee(s) are sub	<u>-</u>		
Please return all correspo	ondence concerning this matter	to the following:		
	Mariam Lee			
		Name of Person		
		Firm/Company		
	4564 Magenta Isles Drive			
	<del> </del>	Address		
	Melbourne, FL 32904			
		City/State and Zip Code		
	mm.lee30@gmail.com		<del></del>	
For further information of	oncerning this matter, please c	to be used for future annual report not all:	ancation)	
Mariam Lee		321 543-1088		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$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)	
Mailing Address:		Street Address:	ootion	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

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>	Name	Address	Type of Action
		N/A	
			□Remove
			Change
			□ Add
			☐ Remove
			□Change
			□Add
			Remove
			☐ Change
			Remove
			Change
	<del></del>		□Add
			🗆 Remove
			□ Change
		<del></del>	
			□Remove

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAMGYPHANS_3, LLC  (Name of the Limited Liability Co.) (A Florida Limited Limited Liability Co.)	mpany as it now appears on our records.) ted Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Liability Comp	any were filed on 09/07/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
Loads Of Joy LLC.		
Loads Of Joy L The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Same as	before
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address here:	ice address on our records, enter the	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	a
	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 ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe	ve date, if other than the date of filing:
he record ord is fil	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated _	November, 9, 2023.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee