123000425684

(Rec	questor's Name)
	,
(Add	dress)
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,	,
(City	/State/Zip/Phone #)
☐ PICK-UP	MAIL MAIL
(Bus	iness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	Illing Officer:
	J. HCTYE
	OCT 18 2023

Office Use Only



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10/10/23--01010--014 **25.00



COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	ISEESTAF	RSGOINGFAR LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspor	ndence concerning this matter t	to the following:	
		Sonia Becerra	
		Name of Person	
		Swyft Filings	
		Firm/Company	
	:	3 Greenway Plaza #1320	
		Address	······································
		Houston, TX 77046	
		City/State and Zip Code	
		elegalcorpsolutions.co	
	E-mail address: (to be used for future annual repo	ort notification)
For further information c	oncerning this matter, please ca	all:	
Sonia B	ecerra	at (<u>877</u>) Area Code	777-0450
Name o	f Person	Area Code	Daytime 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 enclose	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u>		Street Add	
Registration		_	on Section of Corporations
Division of C P.O. Box 632	-		re of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ISEESTARSGOINGFAR 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	09/12/2023	and assigned
Florida document number <u>L23000425684</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
JJR ALGO HOLI	DINGS LLC		
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the de	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		··	
Enter new mailing address, if applicable:			·
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
	 		- - -
B. If amending the registered agent and/or registered office	addrace on our re	aards antar the nam	a of the new registers
agent and/or the new registered office address here:	addiess on our re	cords, enter the ham	e of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flori	da street address	
		, Florida	
	•		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>i</u>		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of a provided for in C	my duties, and I am J hapter 605, F.S. Or,	familiar with and if this document is

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
			□ Add
			□Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
			□ Remove
			☐ Change
··			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove

•	
Effec	tive date, if other than the date of filing: (optional)
Note:	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco	ord 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
rd is t	
Data	October second 202
Datet	1 N
	Signature at a member or authorized representative of a member