## L23000447606

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PICK-UP WAIT MAIL
(Business Entity Name)
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## COVER LETTER .

TO:	Registration Se Division of Cor	ection porations				
erib iez	JSJ Realty :	and Tax LLC				
SUBJEC	.1:	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Florens Julien				
			Name of Person			
		JSJ Realty and Tax LLC				
			Firm/Company			
		1300 NW 192nd Ter				
		Address				
		Miami, FL 33169				
		City/State and Zip Code				
		jassah27@yahoo.com	to be used for future annual report	and the second s		
For furth	er information c	econcerning this matter, please co	·	notineation)		
Florens 3	Julien		305 7101876	1		
	Name o	f Person	at () Area Code Da	ytime Telephone Number		
Enclosed	l is a check for t	he following amount:				
<b>≣</b> \$25.	00 Filing Fee	S30.00 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			
	Registration ! Division of C		Registration Division of	Section Corporations		
	P.O. Box 632	-		of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 2023 GC7 11 721 7: 37

FILED

( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears of orida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabilit	y Company were filed on $\frac{09/27}{2}$	7/2023	and assigned
Florida document number L23000447606	<del></del> ·		
This amendment is submitted to amend the following	ζ:		
A. If amending name, enter the new name of the	limited liability company here	<u>e</u> ;	
he new name must be distinguishable and contain the words "	Limited Liability Company," the des	ignation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	<del></del>	<u> </u>
Principal office address MUST BE A STREET AD	ODRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or regist		ords, <u>enter the r</u>	name of the new regist
	<u></u> .		
ngent and/or the new registered office address her			
Name of New Registered Agent:		la street address , Florida	

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
AMBR	Jasmine Julien	1300 NW 192nd Ter, Miami, FL 33169	🗟 Add
			Remove
			□Change
		- <u>-</u>	□Add
			□Remove
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Filing Fee: \$25.00