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	To: Division of Corporations Fax Number : (850)617-6383	
	From: : . Account Name : LUPA ENTERPRISES INC Account Number : I20200000050 Phone : (727)298-8007 Fax Number : (305)397-0980	
RE	**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: filings@usacorporationservices.com	
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T. LEMIEUX OCT 3 0 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOIF ROSES E	EXPRESS LLC.	•
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our recor	ds.)
(A Florida Limited Lia	bility Company) 12/07/2	
	·	
the Articles of Organization for this Limited Liability Company w	rere filed on	and assigned
Florida document number L23000542544	•	
en la desta de la companya della companya della companya de la companya della com		•
This amendment is submitted to amend the following:	× 1	
XXII amending name, enter the new name of the limited liabili	ty company here:	
	9	
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC	C" or the abbreviation "L.L.C."
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Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)		
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Enter new mailing address, if applicable:	··········	
Mailing address MAY BE A POST OFFICE BOX)	·	· · · · · · · · · · · · · · · · · · ·
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3. If amending the registered agent and/or registered office ad	dress on our records, <u>enter</u>	the name of the new registe
gent and/or the new registered office address here:		34 9 ; T
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Name of New Registered Agent:	•	
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New Registered Office Address:		05 VTE
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		lorida
	City:	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

2 1 23

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.

From:	Luis Grillo	
	Lang Commo	

· Fax: 18885334730

Fax: (850) 617-6381

To:

Page: 4 of 5

28/10/2024 17:05

Hamending 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
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