## L240000H1865

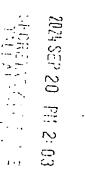
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(Document Number)
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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
		AL ENTERPRISES LLC		
SUBJEC	UI:	Name of Limi	ited Liability Company	
The encl	losed Articles of a	Amendment and fee(s) are subt	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter t	to the following:	
		Joeworn A. Martin		
			Name of Person	
		JNK GLOBAL ENTERPR	ISES LLC	
			Firm/Company	
		1865 wake forest ave		
			Address	
		Clermont Florida 34711		anoly SZR 20 P/A 2: 03
			City/State and Zip Code	S
		jnkglobalenterprises@gmail	Leom	20
		E-mail address: (i	to be used for future annual report notification)	-0
For furt	her information c	oncerning this matter, please ca	aff:	رئ
Joewori	n A. Martin		321 420 2568	- 6
	Name o	f Person	at () Area Code Daytime Telephone Number	•
Enclose	ed is a check for the	he following amount:		
	5.00 Filing Fee		☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JNK GLOBAL ENTERPRISES LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recordiability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Company Florida document number 1.24000041865	were filed on 01/22/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil		
Enter new principal offices address, if applicable:	7901 4TH ST NSTE 300ST, F	PETERSBURG, FL 33702
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		20 22 20
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
		Torida
	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 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	Joeworn A. Martin	7433 catania loop Clermont FL 34714	□Add
			<b>≘</b> Change
AMBR	Shakeda T. Hatten	7433 catania loop Clermont Fl 34714	□Add
			□Remove
AMBR	Richard E. Hatten	1865 wake forest ave Clermont F1 34711	<b>=</b> Add
			200 PRemove
			□ Aid
			□Add
			Change
			□ Add
			□Remove
			Change

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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific : block does no	and cannot be pri- of meet the appl	or to date of filing icable statutory	or more than 90 day	(optional) rs after filing.) Pu ts, this date will	suant to 605,0207 ( not be listed as t
the record specifies a delayed effect cord is filed.	ive date, but t	not an effective	time, at 12:01	i.m. on the earlier	of: (b) The 90	ith day after the
Dated		9:32 am	·			
		0	<del></del>			
		-HURWITTE	7 ~	tative of a member		

Filing Fee: \$25.00