## L24000055475

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## **COVER LETTER**

TO: Registration Solution of Co					
	TECTIVE AGENCY, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
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	Amendment and fee(s) are sub				
Please return all correspondence	ondence concerning this matter	to the following:			
	JOSE A. RODRIGUEZ				
		Name of Person	<del></del>		
	INTEGRAL CONSULTIN	G SERVICES LLC			
		Firm/Company			
	15280 NW 79th CT Ste 11	17			
		Address			
	Miami Lakes, FL 33016				
		City/State and Zip Code			
	info@integralservicesus.co		<del></del>		
		to be used for future initial report it	otification)		
For further information	concerning this matter, please c	all:			
Jose A. Rodriguez		754 301-1370 at ( )			
Name	of Person	Area Code Day	time Telephone Number		
Enclosed is a check for	the 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)		
<u>Mailing Addro</u> Registration		Street Address: Registration	=""		
Division of C	Corporations	Division of C	Division of Corporations		
P.O. Box 63 Tallahassee,		The Centre o 2415 N. Mon	f Tallahassee iroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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J&M PROTECTIVE AGENCY, 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 01/30/2024 and assigned and assigned		
Florida document number 1.24000055475			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	492 NW 165th St Rd Apt C616		
(Principal office address MUST BE A STREET ADDRESS)	North Miami Beach, FL 33169		
Enter new mailing address, if applicable:	492 NW 165th St Rd Apt C616		
(Mailing address MAY BE A POST OFFICE BOX)	North Miami Beach, FL 33169		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new register</u>		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Audiess.	Enter Florida street address		
	, Florida		
	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 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
MGR	MATINO, VINCENZO	58 NE 14TH STREET APT #1204	□Add
		MIAMI, FL 33132	■Remove
			□Change
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			□Remove
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Effective date, if other than the da	ate of filing:		(opti	onal)
If an effective date is listed, the date must b <b>Note:</b> If the date inserted in this block	k does not meet the app	plicable statutory fi	r more than 90 days afte. Ting requirements, thi	r filing.) Pursuant to 605.0207 is date will not be listed as
document's effective date on the Department	artment of State's reco	rds.		
	la la caracteration		an an electron condition of the	The Ofth day after the
	rate, but not an effectiv	e time, at 12.01 a.i	nt, on the earner or, (t	5) The 90th day after the
e record specifies a delayed effective c rd is filed.  November 04  Dated	2024			
rd is filed.  Dated	. 2024	<u> </u>		
Dated November 04	2024 6 40,151) gnature of a member or a		tive of a member	

Filing Fee: \$25.00