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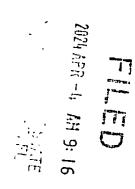
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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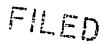
COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: JM VISIONARY LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jose Morales Name of Person
JM Visionary LLC Firm/Company
280 Caroline ave
West Palm Beach FL 33413 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jose Morales = (561) 480.1181
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



()F
JM Visionary LLC	2024 APR -1; AH 9: 16
	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 02.09.24 and assigned
Florida document number L24000072991.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	280 caroline ave
(Principal office address MUST BE A STREET ADDRESS)	west Palm Beach
	FL, 33413
Enter new mailing address, if applicable:	280 caroline ave
(Mailing address MAY BE A POST OFFICE BOX)	west Palm Beach FL 33413
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	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>	Name	Address	Type of Action
AMBR	Lauren Blanco	280 Caroline ave	
		West Palm Beach FL 334	<u>∤13</u> □Remove
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Offectiv	re date, if other than the date of filing:
f an effe <u>Note:</u> 4	ctive 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 605.0207 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
d is file	
Jated _	Signature of a member or authorized representative of a member
	l M
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00