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2024 JUH 26 PH 2:

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COVER LETTER

TO: Registration Section Division of Corpora	n ations			
	YS JUNIOR			
SUBJECT:	Name of Limited	Liability Company		
The enclosed Articles of Am	endment and fee(s) are submi	tted for filing.		
	ence concerning this matter to			
	LESTER CESAR R	RUANO MORAN		
		Name of Person		
	COWBOYS JUNIC			
		Firm/Company		
	1264 EL MIRASOL	LOOP APT 8102		
		Address		
	DAVENPORT FLO			
		City/State and Zip Code		
	AGENTESUNBIZ	DGMAIL.COM o be used for future annual report notific	ration)	
For further information con	ncerning this matter, please ca			
	. RUANO MORAN	863 280327		
Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	e following amount:		□ \$60.00 Filing Fee.	
\$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee		
P.O. Box 632 Tallahassee.	FL 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 JUN 28 PH 2: 25

COWBOYS JUNIOR (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 02/28/2024 and assigned The Articles of Organization for this Limited Liability Company were filed on ____ L24000104160 Florida document number _ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: COWBOYS JUNIOR LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1264 EL MIRASOL LOOP APT 8102 Enter new principal offices address, if applicable: DAVENPORT FL. 33896 (Principal office address MUST BE A STREET ADDRESS) 1264 EL MIRASOL LOOP APT 8102 Enter new mailing address, if applicable: DAVENPORT FL. 33896 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: NISSI MULTISERVICES LLC Name of New Registered Agent: 12720 S ORANGE BLOSSOM TR. SUITE 3 New Registered Office Address: Enter Florida street address __. Florida <u>32837</u> ORLANDO

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

Thereby 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 Type of Action Address <u>Name</u> <u>Title</u> _ 🗖 Add ____ □Remove _____ Change ______**__**_Add _____Remove __ Change □Add ______Remove □Change _ 🗖 Add __ Change __ [□Add _ □Remove ______ Change __ 🗖 Remove _ Change

. II amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	April 16 2024 (optional) Tective date, if other than the date of filing: Tective 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 (in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	06/12/2024 Catalogicity
	Signature of a member or authorized representative of a member
	LESTER CESAR RUANO MORAN Typed or printed name of signee

Filing Fee: \$25.00