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	Registration Se Division of Cor			
aun ma	JOSHUA	M, LLC		
SUBJECT: Name of Limited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all correspo	ondence concerning this matter	to the following:	
		Michael G. Kouskoutis		
			Name of Person	
		Kouslaw PLLC		
			Firm/Company	
		623 E. Tarpon Ave		
		-	Address	
		Tarpon Springs, FL 34689		
			City/State and Zip Code	
		Michael@kouslaw.com		
		E-mail address; (to be used for future annual report no	tification)
For furthe	r information c	oncerning this matter, please c	all:	
Michael (). Kouskoutis		727 421-1334	
Name of Person		Area Code Daytii	me Telephone Number	
Enclosed i	s a check for th	ne following amount:		
\$25.00	0 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)
	1ailing Addres		Street Address:	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monro	ne Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOSHUA M, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our reco ited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 03/14/2024	and assigned
Florida document number 1.24000127264		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	Jability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		24
		F 50
Enter new mailing address, if applicable:		· =
Mailing address MAY BE A POST OFFICE BOX)		
	 	<u> </u>
3. If amending the registered agent and/or registered off	ion uddraes on our roopeds, anto	or the name of the new region
gent and/or the new registered office address here:	ice address on our records, ente	t the name of the new regis
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florida street addre	ess
		Îlorida
	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>	Name	Address	Type of Action
AMBR	TIEN T. HUYN	1416 RED OAK DRIVE	□Add
		TARPON SPRINGS, FL 34689	■ Remove
			Change
AMBR	TIEN T. HUYNH	1416 RED OAK DRIVE	
		TARPON SPRINGS, FL 34689	□Remove
			Change
			□Add
			□ Remove
			□ Change
			□Add
			□ Remove
			□Change
A			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional)	ıl sheets, if necessary.)
	<u></u>
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing re document's effective date on the Department of State's records.	(optional) than 90 days after tiling.) Pursuant to 605.0207 (3)(b, quirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t record is filed.	he earlier of: (b) The 90th day after the
Dated August 8. 2004.	
Signature of a member or authorized representative of a	member
Christopher Cibin Typed or printed name of signee	

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Filing Fee: \$25.00