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## **COVER LETTER**

	Registration Se Division of Cor			
aun IEC		office of Justin L. Virzi, PLLC		
SUBJEC	ΣΤ:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	indence concerning this matter	to the following:	
		Justin L. Virzi		
			Name of Person	
		JDrop, LLC		
			Firm/Company	
		209 Courtney Lakes Circle	e, Apt 306	
			Address	
		West Palm Beach, Florida	33401	
			City/State and Zip Code	
		info@shopjdrop.com		· · · · · · · · · · · · · · · · · · ·
Can final	an in famoatian a		to be used for future annual report not	ilication)
		oncerning this matter, please c		
Justin L			858 230-4041 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ <b>\$</b> 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)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee be Street, Suite 810

No Chek 6/12/24

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Law Office of Justin L. Virzi, PLLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on April 05, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
JDrop, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	209 Courtney Lakes Circle, APT 306
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, Florida 33401
Enter new mailing address, if applicable:	P.O. Box 151
(Mailing address MAY BE A POST OFFICE BOX)	Palm Beach, Florida 33480
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del>	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
			□Add
			Remove
			☐Change
			Remove
			□Change
		<del></del>	□ Add
			Remove
			∴ □Change
			DAdd
			Remove
		<del></del>	Change
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	ust be specific and cannot be prior to date of to block does not meet the applicable statu	(optional) filing or more than 90 days after filing.) Pursuant to 605.0 story filing requirements, this date will not be listed
record specifies a delayed effecti is filed.	ve date, but not an effective time, at 12	:01 a.m. on the earlier of: (b) The 90th day after
June 5	, 2024	
/s/ Justin L. Virzi	Signature of a member or authorized repr	ecuntative of a marrhyr

Filing Foo: \$25.00