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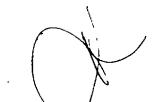
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COVER LETTER

	egistration Se ivision of Cor			
	WFJ III, LI	.C`		
SUBJECT	·	Name of Lin		
The enclos	ed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
		ndence concerning this matter		
		Robert S. Marcus, Esq.	g.	
		Javerbaum Wurgaft Hicks	Name of Person Kahn Wikstrom & Sinins, P.C.	702'N i
		505 Morris Avenue	Firm/Company	<u> </u>
		Springfield, New Jersey 0'	Address 7081	 : :
		rmarcus@lawjw.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
	information co Marcus, Esq.	oncerning this matter, please c	973 379-4200 ex	
_	Name of	Person	at () Area Code Daytim	e Telephone Number
inclosed is	a check for the	e following amount:		
₩ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ro Di Pa	ailing Address egistration Sovision of Co O. Box 6327 Illahassee, F	ection orporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassec, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WEI III, LLC	The Common terms of the Co	
(Name of the Limited Liab (A Flori	oility Company as it now appears on our records.) ida Limited Liability Companyi	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on May 14, 2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	2024
Jayne FB, LLC		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or t	he abbreviation "L.I.r.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	<u>DRESS)</u>	
		ω
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or register gent and/or the new registered office address here: 		name of the new regi
Name of Many Day Japanesi Amente		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
411	Florida	Zin 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
			
			□R em ove
			□Remove
			□Add-+
			□Change
			□Remove
			□Change
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ective date, if other than the effective date is listed, the date in this term of the date inserted in this nument's effective date on the	block does not m	eet the applicable	ate of filing or in statutory filin	(o) fore than 90 days a g requirements,	ptional) fter filing.) Pi this date wi	irsuant to I not be	605.02 listed
cord specifies a delayed effect s filed.	ive date, but not a	in effective time,	at 12:01 a.m.	on the earlier of	(b) The 9	0th day	after th
May 30		2024					
ed	<u></u>	1 VI -					
	16hm X	cmber or authorize	ur				_

Filing Fee: \$25.00