(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : 120230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

Fax Number : (512)597-0678

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BJJ GAMES LLC

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From: ZenBusiness Us

TO: Registration S Division of Co							
BJJ Games	s LLC						
SUBJECT:							
The surland Actions of	Amondment and foo(s) we mile	amised for filing					
	Amendment and fee(s) are sub ondence concerning this matter	_					
Trease retain an correspo	onderice concerning this matter	to the jonowing.					
	Jonathan Taboada						
	Name of Person						
	ZenBusiness INC						
	Firm/Company						
	336 E. College Ave Suite 301						
	Address						
	Tallahassee, FL 32301						
		City/State and Zip Code					
	fulfillment@zenbusiness.co E-mail address:	om (to be used for future annual report no	tification)				
For further information of	concerning this matter, please o						
c/o ZenBusiness INC		844 493-6249					
Name o	of Person	ut () Area Code Dayti	me Telephone Number				
Enclosed is a check for t	he following amount:						
■ \$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)				
Malling Address:		Street Address:					
Registration Division of C		-	Registration Section Division of Corporations				
P.O. Box 632	27	The Centre of	The Centre of Tallahassee				
Tallahassee,	rl 32314	2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Page: 3 of 5

2024-11-09 07:30:04 UTC+14 18506176383 ARTICLES OF AMILIDMENT TO ARTICLES OF ORGANIZATION OF

From: ZenBusiness Use

FILED

2024 NOV -8 PM 5: 10

FALLAHASSFE, FLORIO,

BJJ Games LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed on 2024-06-26	and assigned	
Florida document number L24000288741			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
JoinClaim LLC			
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR.	F.SS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the	e 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.

_____ Change

To:

To:

From: ZenBusiness Use

Filing Fee: \$25.00

Typed or printed name of signee