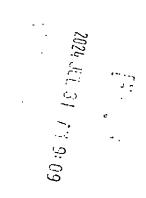
## L24000320181

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Divi	ision of Cor	porations			
		efurbishments LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of	Amendment and feers) are sub	mitted for tiling		
Please return	all correspo	ndence concerning this matter	to the following:		
		Joseph Leyva			
	Name of Person				
		Triple Js Refurbishments I	.I.C		
			Firm Company		
		557 Chancellor Dr W			
			Address	······································	
		Jacksonville Fl 32225			
			City/State and Zip Code		
		triplejsrefurbishments22@g			
		E-mail address: (	to be used for future annual report	notification)	
For further in	iformation c	oncerning this matter, please c	all:		
Joseph Leyv			619 2129563		
	Name o	f Person	at () Area Code Day	vtime Telephone Number	
Enclosed is a	check for th	ne following amount:			
□ \$25.00 F	iling 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)	
	iling Addres		Street Address Registration		
Div	vision of C	Corporations	Division of C	Corporations	
P.C	), Box 632	. /	The Centre of	of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Triple Js Refurbishments LLC		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our record da Limited Liability Company)	<u>N.</u> )
The Articles of Organization for this Limited Liability Florida document number <u>L24000320181</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited 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 ADE	DRESS)	202
		E SE
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BON)		3
		<u>ن</u> '
		09
B. If amending the registered agent and/or register agent and/or the new registered office address here		the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	
	E1	orida
***************************************	City.	Zip Code
N 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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
AMBR	Joseph Leyva	557 Chancellor Dr W Jacksonville Fl 32225	■Add
			□Remove
			□Change
<del></del>			Ci Add
			□Remove
			Change
			🗀 Add
			□Remove
			[]Change
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			Change

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<b>lote:</b> If the date inse	ner than the date of filing: ad, the date must be specific and carried in this block does not mee date on the Department of Stat	at the applicable statute	(opt ling or more than 90 days afte ory filling requirements, th	ional) er filing.) Pursuant to 605,0205 is date will not be listed as
	layed effective date, but not an	reffective time, at 12:0	01 a.m. on the earlier of: (	b) The 90th day after the
l is filed.		·		
record specifies a de d is filed. Dated	Signature of a mer	mber or authorized repre	sentative of a member	