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# **COVER LETTER**

TO:				
SUBJI	ECT:	- I OTHER TO THE	, , , , , , , , , , , , , , , , , , , ,	LLC
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Name of Limited Liability Company  sed Articles of Amendment and fee(s) are submitted for filing.  Irrn all correspondence concerning this matter to the following:  TOWN Taylor  Name of Person  Firm/Company  2013 TPSTW DL  Address  ORLAWD FL 32837  City/Ntare and Zip Code  Pall Starbare Darrock com  E-mail address: (to be used for future annual report notification)  r information concerning this matter, please call:  TOWN 1 407 697-1704  Name of Person  Area Code Daytime Telephone Number		
			Firm/Company	
		2013	TPSDEW DI	<u> </u>
		Pall	City/State and Zip Code  Star Nowse Octobe used for future annual report notice	837 CUTLOOK COM
For fu	rther information co	oncerning this matter, please ca	all:	
	TOWN Name of	Person	at ( <u>407</u> ) <u>697</u> - Area Code Daytime	-1704 e Telephone Number
Enclos	ed is a check for th	e following amount:		
□ <b>\$</b> 2	25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jongthan Blair	Dosigns LLC.
(Name of the Limited Liability Company as (A Florida Limited Liability)	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were Florida document number 12900327705	filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	=:· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
	(7)(C) TO (1)(C) (TO (
Enter new mailing address, if applicable:	11 12 Family
Mailing address MAY BE A POST OFFICE BOX)	- TE - 3
3. If amending the registered agent and/or registered office addressent and/or the new registered office address here:	ess on our records, enter the name of the new registe
gent and/or the new registered office address here.	
Name of New Registered Agent:	1
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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	John Taylor	2013 IPSDEN DR. ORLANDO, FL. 32837	ZSAdd
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effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory frament's effective date on the Department of State's records.  ord specifies a delayed effective date, but not an effective time, at 12:01 a.	Iling requirements, this da	ng.) Pursi ite will r	not be listed
filed.	, ,		•
d_ Sept 11.2024			
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