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COVER LETTER

TO:

Registration Section Division of Corporations

MS JEN SUBJECT:	NS LLC		
<u></u>	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Alphonso Tiindal		
		Name of Person	
	Ms. Jenns LLC		
		Firm/Company	
	551 NW 80 Avenue #104		
		Address	
	Margate, FL 33063		
		City/State and Zip Code	
	msjennssauce@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
for further information	a concerning this matter, please c	all:	
Jennifer Tindal		754 272-5110	
Name of Person		at () Area Code Daytin	ne Telephone Number
Enclosed is a check fo	r the 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)
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2011-01 FI 2:07 (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 Company were filed on August 20, 2024 and assigned .. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

MS JENNS LLC

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.

City

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
MGR	Alphonso D. Tindal	551 NW 80 Avenue #104	≣ Add
		Margate, FL 33063	🗆 Remove
			□ Change
MGR	Jennifer J. Tindal	551 NW 80 Avenue #104	
		Margate FL 33063	□Remove
			□ Change
			□ Remove
			□Change
			□Remove
			□Change
			□ Add
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			DbbA
			□Remove
			□Change

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	ist be specific and cannot b	oe prior to date of filing	or more than 90 days after t	
an effective date is listed, the date mu	Mark dars nat meet the	appricative statutery	ming requirements: this	duce will not be fisted as
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