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Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : TAP SOLUTIONS INC

Account Number : I20210000103

Phone

: (786)615-3057

Fax Number

: (786)615-3058

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JC GLOBAL TRADE LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JC GLOBAL TRADE LLC				
(Name of the Limited Lia (A Flo	bitity Compa rida Limited L	ny as it now appears on our requirements.	ords.)	
The Articles of Organization for this Limited Liability Florida document number	y Company	were filed on 09/05/2024		_ and assigned
This amendment is submitted to amend the following	<b>;</b> :			
A. If amending name, enter the new name of the l	<u>imited liab</u> i	ility company here:		
The new name must be distinguishable and contain the words	Limited Liabil	ity Company," the designation "	LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:				26
(Principal office address MUST BE A STREET AD		14611 SW 21ST STREET	<u> </u>	775
		MIAMI, FL 33175		12 1
			į,	লৈ স
Enter new malling address, if applicable:				3
(Mailing address MAY BE A POST OFFICE BOX)	)	14611 SW 21ST STREET	<u>[</u>	**
	-	MIAMI, FL 33175	r	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address her  Name of New Registered Agent:	<u>.e</u> :		ter the name o	of the new registero
New Registered Office Address: 14	611 SW 21S	T STREET  Enter Florida street aa	Idress	
	IAMI			ς .
M	IVIAII	City	, Florida 3317	Zip Code
New Registered Agent's Signature, if changing Regist	ered Agent:	•		
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	ent and agr d complete d agent as p tered office	ee to act in this capacity. performance of my duties provided for in Chapter 6	s, and I am far 05, F.S. Or, if	niliar with and this document is

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	CRUZ ALGECIRA, DANIUSKA	8418 NW 61 ST	□Add
		MIAMI, FL 33166	■Remove
AMBR	CRUZ ALGECIRA, DANIUSKA	14611 SW 21ST STREET	<b>\B</b> Add
		MIAMI, FL 33175	□Rcmove
			☐ Change
$\overline{}$			□Remove
			CiChange
			Remove
			Change
<del></del>			□Abd
			□Remove
			Change
			□Add
$\overline{}$			□Remove
			□ Change

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Effective date, if other than the d	late of filing:		(optional)
Effective date, if other than the defence date, if other than the defence date is listed, the date must be note:  Note: If the date inserted in this blood document's effective date on the Dep	ck does not meet the appli	cable statutory filing requ	irements, this date will not be liste
record specifies a delayed effective d is filed.	date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90th day after
NOVEMBER 26	2024		
	1	<u> </u>	

Typed or printed name of signee