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COVER LETTER

TO: Registration Se Division of Cor	ection rporations	,	<i>3</i>	
JDMM03	LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	David Levine, Esq.			
		Name of Person		
	Levine Legal, P.A.			
		Firm/Company		
	9124 Griffin Road			
		Address		
	Cooper City, Florida 3332	8		
	david@levine-legal.com	City/State and Zip Code		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report noti all:	fication)	
David Levine		954 585-3967		
Name o	of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for the	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)	
Mailing Addres Registration S		<u>Street Address:</u> Registration Sec	ction	
Division of Corporations		Division of Corporations		
P.O. Box 632		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JDMM03 LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 09/17/2024	and assigned
lorida document number 1.24000405465		<u> </u>
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L,C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	·	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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, 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>	<u>Address</u>	Type of Action
MGR	JANET DI DIONATO	547 4TH STREETEAST	□Add
		NORTHPORT, NY 11731 UN	■Remove
			□Change
MGR	JANET DI DONATO	547 4TH STREETEAST	■Add
		NORTHPORT, NY 11731	□Remove
			Change
			□Add
			□Remove
			□Change
		-	
			□Remove
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ective date, if other than the a effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	be specific and cannot be p ck does not meet the ap	plicable statutory	or more than 90 days a	ptional) filter filing.) Pursuant to this date will not be	605.0207 listed as
cord specifies a delayed effective s filed.	date, but not an effective	ve time, at 12:01 a	.m. on the earlier of	(b) The 90th day a	ifter the
ed	. 2024	·			
_M	Chael Makinajian Marinajian Sep 22, 2024 19 16 EDT.	_			
If than	Makinapan Sep 22, 2024 19 16 EDT, Signature of a member or a	uthorized represent	ative of a member		
	MICHIA	EL MAKINAJIA!			

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Filing Fee: \$25.00