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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JEHOVA SHAMMAH NOW, LLC

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P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

TO: Registration So			(((H25000028499 3)))
Division of Co.			
SUBJECT:		AMMAH NOW, LLC	
	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249	·	
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	
	efile1234@incfile.com		
		to be used for future annual report notific	CSH (CH)
For further information c	concerning this matter, please c	all:	
LOVETTE DOBSON		i (888) 462-345	53
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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		Street Address: Registration Sect	tion
Division of C		Division of Corp	

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

(((H25000028499 3)))

JEHOVA SHAMM		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L25000010375}{L25000010375}$. This amendment is submitted to amend the following:	were filed on 01/06/2025	and assigned
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabit	ity Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1150 Nw 72nd Ave Tower 1 8	Ste 455 #19377
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33126	
Enter new mailing address, if applicable:	1150 Nw 72nd Ave Tower 1 S	Ste 455 #19377
(Mailing address MAY BE A POST OF FICE BOX)	Miami, FL 33126	15. 15.
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter</u>	the name of the new registered
New Registered Office Address:		
	Enter Florida street addre	AN
		lorida
New Registered Agent's Signature, if changing Registered Agent:	Cuy	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, a provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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If Changing Registered Agent, Signature of New Registered Agent

1/27/2025 07:21:41 CST Page: 4/5

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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		(((H25000028499 3))
MGR = Manager		
AMBR = Authorized	Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Change
			□Add
			□Remove
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reco	ord specifies a delayed efficient.	ffective date, but no	2025	time, at 12:01 a.r	ess.	of: (b) The 90th	day after the

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