

	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
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	(Business Entity Name)
	(Document Number)
Certified Conies	Certificates of Status
Special Instructions to	Filing Officer
Opecial manucilons to	rilling Officer.
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Office Use Only





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
For any issues please contact
Cheyanne Davis
(850) 202-1882

Date: 08/1	ate: 08/16/2024 (85		
Name:C	heyanne Davis		
	2467937		
	JC RISE UP	LLC	
✓ Articles of	Incorporation/Authorization to Trans	sact Business	
Amendmer	nt	٠,	
Change of	Agent	· · · · · · · · · · · · · · · · · · ·	
Reinstaten	nent		
Conversion	n		
Merger			
Dissolution	n/Withdrawal		
Fictitious N	Name		
Other			
Authorized Amou	nt: \$25.00		
Signature:	Chaymet Ra-		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JC Rise Up LLC (Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000350616</u>	y were filed on August 14, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words *Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
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 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
MBRM	John Merola, Sr.	2036 Bantry Drive	□Add
		Keller, Texas 76262	■Remove
			□Change
MBRM	Ann Merola	2036 Bantry Drive	
		Keller, Texas 76262	■Remove
			□Change
AMBR	286-302 Realty LLC	388 Little Clove Road	Add
		Staten Island, New York 10301	□Remove
			□ Change
			□Add
			□Remove
			□Change
			————Remove
			C) (Change
			□ Add
			□Remove
			□Change

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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: 1f the date inserted in this block does not meet the ument's effective date on the Department of State's re-	ephorto date of filing applicable statutory	or more than 50 days after t	filing.) Pursuai	nt to 605.02 t be listed
cord specifies a delayed effective date, but not an affect filed.	tive time, at 12:01 a	i.m. on the earlier of: (b)	The 90th c	lay after th
ed August 15 2024				
Signate of a member	authorized represent	ative of a member		
	•			

Filing Fee: \$25.00