

1220000414505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

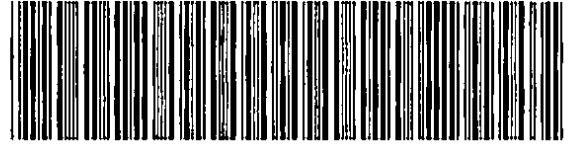
(Document Number)

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FILED
2023 JAN 23 AM 7:27
CLERK OF THE STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 7, 2023

JARED DOLBEE
9649 SW PURPLE MARTIN WAY
STUART, FL 34997

SUBJECT: 4J IRRIGATION SERVICES, LLC
Ref. Number: L22000414505

We have received your document for 4J IRRIGATION SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 023A00000452

2023 JAN 23 PM 12:53

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2023 JAN 23 AM 7:2

4J Irrigation Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRET
TALLAHASSEE, FL
STATE

The Articles of Organization for this Limited Liability Company were filed on September 9, 2022 and assigned
Florida document number L22000414505.

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 "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 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: Jared Dolbee

New Registered Office Address: 9649 SW Purple Martin Way
Enter Florida street address

Stuart, Florida 34997
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>	<u>Type of Action</u>
AMBR	Jared Dolbee	9649 SW Purple Martin Way	<input checked="" type="checkbox"/> Add
		Stuart, FL 34997	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jackeline Dolbee	9649 SW Purple Martin Way	<input type="checkbox"/> Add
		Stuart, FL 34997	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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