

F15000001316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

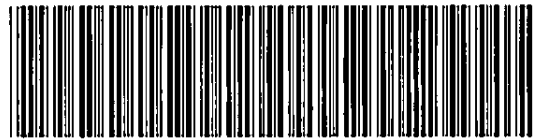
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800408412908

*Amend*

FILED

2023 MAY -9 AM 8:34

SECRETARY OF STATE  
CLERK OF COURTS

A. RAMSEY  
MAY 12 2023



2023 MAY -9 PM 2:01

\*02250, 00524 00071



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 10, 2023

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

TALLAHASSEE, FL 32312

SUBJECT: LJA ENGINEERING, INC.  
Ref. Number: F15000001316

**CORRECTED**  
**Please Allow For**  
**Same File Date**

We have received your document for LJA ENGINEERING, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

An affidavit amending officers can only be filed during a corporation's first year of qualification. You may file an amendment to change the officers. I have enclosed an amendment form.

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.

Annette Ramsey  
OPS

Letter Number: 423A00010574

RECEIVED  
2023 MAY 11 AM 11:08  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312  
(850) 656-4724

DATE 05/09/2023

**\*\*WALK IN\*\***

ENTITY NAME LJA Engineering, Inc.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$35

ACCOUNT #: 120160000072

*E R J/O*

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: LJA ENGINEERING, INC.

Name of Corporation

DOCUMENT NUMBER: F15000001316

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

L Ferrell

Name of Contact Person

Harbor Compliance

Firm/Company

1830 Colonial Village Lane

Address

Lancaster, PA 17601

City/State and Zip Code

professional@harborcompliance.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

L Ferrell

Name of Contact Person

at ( 717 ) 459-9173

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F15000001316

(Document number of corporation (if known))

1. LJA ENGINEERING, INC.

(Name of corporation as it appears on the records of the Department of State)

2. TX

(Incorporated under laws of)

3. 03/17/2015

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) \_\_\_\_\_

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

**FILED**  
**2023 MAY -9 AM 8:34**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice President	Ralph J. Rhodes	3600 W Sam Houston Pkwy S Ste 600 Houston, TX 77042	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
Vice President	Steven E. Burkholder	3600 W Sam Houston Pkwy S Ste 600 Houston, TX 77042	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

/s/ James D. Ross

(Signature of a director, president or other officer - if in the hands of  
a receiver or other court appointed fiduciary, by that fiduciary)

James Ross

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE \$35.00**