

F15000001316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

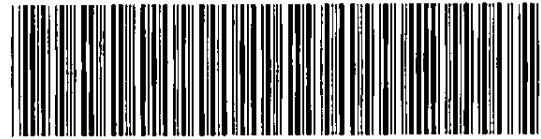
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



800424290868

*Amend*

FILED  
2024 FEB 21 AM 8:59

RECEIVED  
2024 FEB 21 PM 2:54  
ALABAMA SECRETARY OF REVENUE

A. RAMSEY  
FEB 26 2024

\*02250, 00524, 00671

**Incorporating Services, Ltd.,**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

**incserv**

**ORDER FORM**

**TO:** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM:** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 2/21/2024

**PRIORITY** Regular Approval

**OUR REF.# (Order ID#)** 1232106

**ORDER ENTITY**  
LJA ENGINEERING, INC.

**PLEASE PERFORM THE FOLLOWING SERVICES:**

LJA ENGINEERING, INC. ( FL )

File the attached amendment

**NOTES:**

\$35.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**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:

C. SHIELDS

\_\_\_\_\_  
Name of Contact Person

HARBOR COMPLIANCE

\_\_\_\_\_  
Firm/Company

1830 COLONIAL VILLAGE LANE

\_\_\_\_\_  
Address

LANCASTER, PA 17601

\_\_\_\_\_  
City/State and Zip Code

license@lja.com

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

For further information concerning this matter, please call:

C. SHIELDS

\_\_\_\_\_  
Name of Contact Person

at ( 717 ) 431-9037  
\_\_\_\_\_  
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



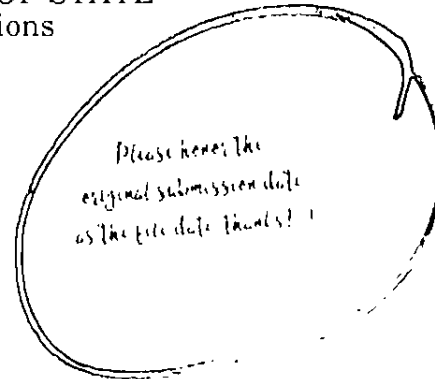
FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2024

INCORPORATING SERVICES, LTD

TALLAHASSEE, FL 32301

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



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:

The form that you submitted is incorrect. It is for a Florida domestic profit corporation and your entity is a foreign (out of state) corporation. I have enclosed the correct 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: 424A00003915

*Please honor the  
original submission date  
as the file date! Thanks!*

RECEIVED  
2024 FEB 23 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Texas

(Incorporated under laws of)

3. 05/31/2023

(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  
2024 FEB 21 AM 8:59  
CLERK OF THE COURT  
JACKSONVILLE, 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>
D	Brent Cullen Guillot	3600 W Sam Houston Pkwy, Ste 600	<input checked="" type="checkbox"/> Add
		Houston, TX 77042	<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
			<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.

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 D. Ross  
 (Typed or printed name of person signing)

President & CEO  
 (Title of person signing)

**FILING FEE \$35.00**