

LD5000021508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

MAIL

(Business Entity Name)

(Document Number)

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EXAMINER

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Cover Letter

To State of Florida
Division of Corporations

From P J Construction Group LLC
Doc number L 05000021508
2635 Garfield Street
Hollywood Florida 33020

954 709 3304
pjconstruction@bellsouth.net

Re New Treasurer
Ammendment

Please change our treasurer to
Adrian Motorga
2635 Garfield Street
Hollywood FL 33020

Thank You



Paule Jacques – Registered Agent

Date 11-17-2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PJ CONSTRUCTION GROUP LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paule Jacques
Name of Person
P J CONSTRUCTION
Firm/Company
2635 GARFIELD STREET
Address
HOLLYWOOD FLORIDA 33020
City/State and Zip Code
pjconstruction@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paule Jacques at 954 709 3304
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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 ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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

The Articles of Organization for this Limited Liability Company were filed on MARCH 3-2005 and assigned Florida document number L 05000021508

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 end with 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)

NEW
Treasurer
Adrian MOTO RGA
2635 GARFIELD ST.
HOLLYWOOD FL 33020

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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TALLAHASSEE FLORIDA

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
TREASURER	Adrian MOTO RGA	2635 GARFIELD HOLLYWOOD FLORIDA 33020	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 11-17-2009

Paule Jacques
Signature of a member or authorized representative of a member
Paule Jacques
Typed or printed name of signee

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TALLAHASSEE FLORIDA