

LOS 0000 64185

(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:

LOS-64185

Office Use Only



500058595045

08/19/05--01020--014 **30.00

FILED
05 AUG 19 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JHOME IMPROVEMENT 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:

JEFFERY HAMPTON
(Name of Person)

JAH HOME IMPROVEMENT LLC
(Firm/Company)

131 CRIBHOUSE BLVD
(Address)

NEW SMYRNA BEACH, FL 32168
(City/State and Zip Code)

For further information concerning this matter, please call:

[Signature]
(Name of Person)

at 386 426-1489
(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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
05 AUG 19 AM 10:38
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

JHOME IMPROVEMENT LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 6/28/05 and assigned document number LOS000064185

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE I:

The name of the limited liability company
is: JAH HOME IMPROVEMENT LLC
effective immediately.

Dated 8-18, 2005.

FILED
05 AUG 19 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or authorized representative of a member

Jeffery Amaton

Typed or printed name of signee

Filing Fee: \$25.00