

LO7 000073289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

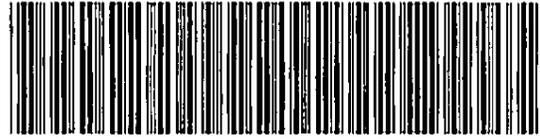
(Business Entity Name)

(Document Number)

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COVER LETTER

*AMENDMENT TO
ARTICLES OF INC.*

12/29/19

**TO: Registration Section
Division of Corporations**

J&J Building, LLC

SUBJECT: _____
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:

James J. Costello

Name of Person

J&J Building, LLC

Firm/Company

1010 Johns Point Drive

Address

Oakland, FL 34787

City/State and Zip Code

jjcostello4@hotmail.com

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

For further information concerning this matter, please call:

James J. Costello

Name of Person

407 6148793

at (_____) _____

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 Address:

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

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

J&J Building, 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 7/16/2007 and assigned Florida document number L07000073289

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:

1010 Johns Point Drive

(Principal office address MUST BE A STREET ADDRESS)

Oakland, FL 34787

Enter new mailing address, if applicable:

1010 Johns Point Drive

(Mailing address MAY BE A POST OFFICE BOX)

Oakland, FL 34787

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:

James J. Costello

New Registered Office Address:

1010 Johns Point Drive

Enter Florida street address

Oakland

Florida 34787

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>
	Debra C Costello		<input type="checkbox"/> Add
		1010 Johns Point Drive, Oakland, FL 34787	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jerel M Miller		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1508 Johns Cove Lane, Oakland, FL 34787	<input checked="" type="checkbox"/> Change
AMBR	James J Costello		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1010 Johns Point Drive, Oakland, FL 34787	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Summary of changes:

Remove Debra C. Costello from AMBR to disassociated status

Change Jerel M. Miller from MGR to AMBR

Change James J. Costello form MGR to AMBR

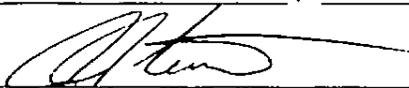
E. Effective date, if other than the date of filing: 12/29/2019 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 29 2019



Signature of a member or authorized representative of a member

James J. Costello - AMBR

Typed or printed name of signer