

LI00000052205

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: J & M Home Improvement and Maintenance
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:

Mark W. Clause
Name of Person

J & M Home Improvement and Maintenance
Firm/Company

404 Triton St.
Address

Crestview, FL, 32536
City/State and Zip Code

markclause@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark W. Clause at (850) 826-0304
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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

J & K Home Repair & Maintenance LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 8/13/2010 and assigned
Florida document number L10000052205.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

J & M Home Improvement and Maintenance LLC

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)

Jeffrey S. Holcombe
6471 Possum Ridge Rd.
Crestview, FL, 32539

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:

Jeffrey S. Holcombe

New Registered Office Address:

6471 Possum Ridge Rd.

Enter Florida street address

Crestview

City

Florida

32539

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 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.

X Jeffrey S. Holcombe
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>
MGR	Jeffrey S. Holcombe	6471 Possum Ridge Rd.	☒ Add
		Crestview, FL 32539	☐ Remove
MGRM	Mark W. Clause	404 Triton St.	☒ Add
		Crestview, FL 32536	☐ Remove
			☐ Add
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FLORIDA

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

Dated 20th of Sept. 2013, _____.

Jeffrey S Holcombe

Signature of a member or authorized representative of a member

JEFFREY S HOLCOMBE

Typed or printed name of signee

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Filing Fee: \$25.00

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