

L11000029096

(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



800297834228

04/13/17--01015--016 **25.00

2017 APR 13 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

K. SALY

APR 14 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JDM CONSTRUCTION SERVICES 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:

JILL MCANUFF

Name of Person

JDM CONSTRUCTION SERVICES LLC

Firm/Company

2159 NW 74TH WAY

Address

PEMBROKE PINES FL 33024

City/State and Zip Code

JILL954C@YAHOO.COM

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

For further information concerning this matter, please call:

JILL MCANUFF

Name of Person

at (786)

Area Code

426-3546

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**

JDM CONSTRUCTION SERVICES LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2017 APR 13 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/29/2017 and assigned
Florida document number LC11000029096.

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:

(Principal office address MUST BE A STREET ADDRESS)

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

City

, Florida

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>
VP, T, O	JILL MCANUFF	2159 NW 74TH WAY	<input type="checkbox"/> Add
		PEMBROKE PINES FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
MGR	JILL MCANUFF	2159 NW 74TH WAY	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES FL	<input type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
P	DURVAL MCANUFF	2159 NW 74TH WAY	<input type="checkbox"/> Add
		PEMBROKE PINES FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
MGR	DURVAL MCANUFF	2159 NW 74TH WAY	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES FL	<input type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2011 APR 13 PM 2:09
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

2017 APR 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

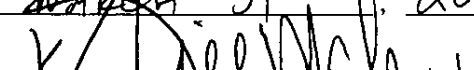
FILED
2007 APR 13 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated 11/03/2017

~~MARCH~~ 31, 2017.



Signature of a member or authorized representative of a member

JILL MCANUFF

Typed or printed name of signee