L12000025879

(Re	questor's Name)	··· -
(Ad	dress)	
,	,	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
•		
(Do	cument Number)	<u>, </u>
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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DIVISION OF CORPORATIONS

MAY 1 4 2012 T. HAMPTON

COVER LETTER

	Registration Section Division of Corpor			
SUBJEC	`T•	J & B Quali	ty Millwork LLC	
CODIE	· · ·	Name of Lim	ited Liability Company	
The encl	osed Articles of Am	endment and fee(s) are sub	omitted for filing.	
Please re	turn all corresponde	ence concerning this matter	to the following:	
	_		Judy Powers	
			Name of Person	
		J & B Qu	ality Millwork LLC	
	-		Firm/Company	
		4	901-5 Georgia Avenue	
Address				
	-	West Pal	m Beach, FL 33405	
		i.a.m.	City/State and Zip Code	
	-	E-mail address: (1	owers@bellsouth.net to be used for future annual report notificat	ion)
For furthe	er information conc	erning this matter, please c	all:	
Judy Powers Name of Person			at (<u>561</u>) 762-944 Area Code & Daytime To	
Enclosed	is a check for the fo	ollowing amount:		
\$25.00	0 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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**

J & B Quality Millwork LLC

(Name of the Limited Liab	ility Company as it now app ida Limited Liability Company	ears on our records.)	
(A Flori	ida Limited Liability Company	y)	12
The Articles of Organization for this Limited Liabilit	ty Company were filed on _	2-22-1 2	and assigned
Florida document number L12000025879	<u>9</u> .		
			200 C
This amendment is submitted to amend the following	j :		OF STATE OR ATTON
A. If amending name, enter the new name of the	limited liability company l	<u>iere</u> :	10HS
			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	npany," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
	<u> </u>		
B. If amending the registered agent and/or re-	gistered office address or	n our records, enter	the name of the new
registered agent and/or the new registered office a	_	i our records, <u>enter</u>	the light of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		. Florida	
-	City	, 1 1011000	Zip Code
New Registered Agent's Signature, if changing Register	ered 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

Title Name Address Type of Action

MGR Guillermo C. Avilez 4901-5 Georgia Avenue Add Remove

Add Remove

		Add Remove
		Add Remove
		Add Remove
		Add Remove
		Add Remove
D. If amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	SEGRETARY OF DIVISION OF COM
Dated	5-8, 2012.	TANIA S
-	Signature of a member or authorized representative of a member Judy Powers, Manager Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00