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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JP and Son 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:
Jaime Perle Name of Person
IP and Son Construction Services, LLC
1629 NW 15 COURT Address
FORT LANDER DALE, FL 33311 City/State and Zip Code
anyn. per le a grail. com JE-mail (ddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jaime / Amy Perle at (954) 470 - 5624 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Compositions STREET/COURIER ADDRESS: Registration Section Division of Compositions

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Thand Son Con (Name of the Limited I	STRUCTON Jability Company s Jorida Limited Liab	SERVICES, LU as it now appears on our rec ility Company)	Cords,)
The Articles of Organization for this Limited Lia Florida document number \(\begin{align*} \begin{align*} \begin{align*} \begin{align*} 13000118 \end{align*}	bility Company we 499	ere filed on $8 3 3$	and assigned
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 82/21/13 and assigned corida document number 1300118499. This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation L.C." The new principal offices address, if applicable: Thincipal office address MUST BE A STREET ADDRESS)			
A. If amending name, enter the new name of t	he limited liabilit	y company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited	Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Enter new mailing address, if applicable:			FILE SEP 30 CANASSEE
(Mailing address MAY BE A POST OFFICE B	<u>ox)</u> _		C =1
	-		₩ 57
		e address on our records	s, enter the name of the new
Name of New Registered Agent:	Amy M	1. Perle	
New Registered Office Address:	1629 N	W 15 CT	
		Enter Florida :	
	YORT LE	<u>NDEROAVE</u> , Fl City	lorida <u>333//</u> 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.

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 <u>Name</u> <u>Address</u> **Type of Action** Amy M. Perle 1629 NW 15 COURT Add FORT LAUDENDALE, FL Remove 33311 P JAIME N. PERLE 1629 NW 15 COURT DANS FORT LAUDERDALE FL Remove 33311 JAIME N. PERLE 1629 NW 15 COURT XAD FORT LAUDENOALE, FL. Remove 33311 Remove

f a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
ed_	9-17-13
	Stance N. Perce
	SAIME N. PERCE
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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ANTANASSEE, FLORIDA