# L140000044258

(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:							
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)						
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status							
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)						
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status							
PICK-UP   WAIT   MAIL     (Business Entity Name)	(Address)						
PICK-UP   WAIT   MAIL     (Business Entity Name)							
PICK-UP   WAIT   MAIL     (Business Entity Name)	(City/State/Zip/Phone #)						
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	, , , , ,						
(Document Number)  Certified Copies Certificates of Status	PICK-UP WAIT MAIL						
(Document Number)  Certified Copies Certificates of Status							
(Document Number)  Certified Copies Certificates of Status	(Business Entity Name)						
Certified Copies Certificates of Status	, ,						
Certified Copies Certificates of Status	(Document Number)						
	(Boodine Namber)						
	Codification of Chatra						
Special Instructions to Filing Officer:	Certified Copies Certificates of Status						
Special Instructions to Filing Officer:							
	Special Instructions to Filing Officer:						
	3						

Office Use Only



000354598820

11/10/20--01015--018 \*\*30.00

2023 NOV -9 AM 7:41

O SIMMONS
DEC 1 6 2020

## **COVER LETTER**

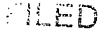
Division of Corporations
SUBJECT: J.A. Construction & Development, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Julio Almandoz Name of Person
J.A. Construction & Development, LLC
24210 SW. 147 1 Ave
Homestead FL. 33032 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tulio Almandoz at (786) 382 - 1008 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy tadditional copy is enclosed)  ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

TO: Registration Section

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.A. Construction ? L	Jevelopment, 2023-00 -9 AM 7:41
( <u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records.) itted Liability Company)  STOTE  STATE
	JALAMATE, FL
The Articles of Organization for this Limited Liability Comp	pany were filed on & and assigned
Florida document number <u>L14000049288</u>	
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 ADDRES.	<u>s)</u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	fice 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
<del></del>	, Florida
	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 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>	Name	Address	2023 NOV -9	AH 7:41	Type of Action
Mr. Ams	Eduardo Torres	24210 Sh	SEGRITHS	TO ESTATE	DAdd
		Itomestea	d, FL. 3	3032	□Remove
			7000		Change
	<del></del>				□Add
					□ Remove
			<u> </u>		□ Change
			<u></u>		□Add
					□Remove
					Change
				<del></del>	□ Add
					□Remove
			<del></del>		□Change
<del></del>					□ Add
			<del></del>		□Remove
				·	□Change
					□Add
			· · · · · · · · · · · · · · · · · · ·		□Remove

\_\_\_\_\_ □Change

	2023 NOV -9 AM 7: 41
	SECRETARY DE SEATE
	TELLAURESCE, FL
-	
	· · · · · · · · · · · · · · · · · · ·
_	
-	
-	
-	
-	
f an ef <u>Note:</u>	ive date, if other than the date of filing:
record is fi	d 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 led.
Dated	November le 2020.
	- Chilio Almandan
	Signature of a member or authorized representative of a member  Julio Almandoz  Typed or printed name of signee

• :

Filing Fee: \$25.00