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T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JPR Universal Construction, 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:

Lewie A. Hunter
Name of Person
JPR Universal Construction, LLC
Firm/Company
1079 Cephas Drive
Address
Clearwater, FL 33765
City/State and Zip Code

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

For further information concerning this matter, please call:

Lewie A. Hunter	_{at (} 727 ₎	447-2155
Name of Person	Area Code	Daytime Telephone Number

universal.developmentllc@gmail.com

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**

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	OF	
JPR Universal Construction	on, LLC	Vappears on our records.) Inpany) March 31, 2014 And assigned of the control of
(Name of the Limit	ted Liability Company as it nov (A Florida Limited Liability Cor	v appears on our records.)
	(A Florida Limited Liability Con	Florit
The Articles of Organization for this Limited L	iability Company were filed	March 31, 2014 and assigned
Florida document number L14000052238		
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name of	of the limited liability comp	pany here:
The new name must be distinguishable and end with the	words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation "L.L.C."
The new hame mast be distinguishable and end with the	words Ellined Elability Compa	my, the designation left of the appreviation left.
Enter new principal offices address, if appli-	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
		
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
(Mailing address MAY BE A POST OFFICE	<u>BUX)</u>	
		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
D 16		
B. If amending the registered agent and registered agent and/or the new registered of		ress on our records, enter the name of the new
registered agent and/or the new registered to	ince address nere.	
	Lewie A. Hunter	
Name of New Registered Agent:	Lewie A. Hunter	
New Registered Office Address:		
	Ε	nter Florida street address
		. 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Isbelia M. Reyes	1079 Cephas Drive	= Add
		Clearwater, FL 33765	Remove
MGR	Zoraida M. Reyes	1079 Cephas Drive	= Add
		Clearwater, FL 33765	Remove
MGR	Jorge L. Bayon Otero	1079 Cephas Drive	Add
		Clearwater, FL 33765	Remove
MGR	Victor Rivera Rivera	1079 Cephas Drive	≣ Add
		Clearwater, FL 33765	□ Remove
MGR	Michael J. Scarfia, Jr.	1079 Cephas Drive	□ Add
		Clearwater, FL 33765	Remove
			Remove

ective date, if other than the date of fi effective date must be specific, cannot be prior t date this document is filed by the Florida Depart	iling:	(optional) not be more than 90 days after
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date this document is filed by the Florida Depart	tment of State)	(optional) not be more than 90 days after
Fective date, if other than the date of fire effective date must be specific, cannot be prior to date this document is filed by the Florida Department department of the date of the file	tment of State)	

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