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(Cn	ry/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corpora		1	
SUBJECT: RO	bert Jone Name of Limi	S Construction, ted Liability Company	LLC_
The enclosed Articles of Ame	endment and fee(s) are subm	nitted for filing.	
Please return all corresponder	ace concerning this matter t	o the following:	
-	Ro	obert Jones Name of Person	
-	Robert	Jones Constru	chien, LLC
-	1950 Be	rn Creek Loop Address	
-	Saraso	ta, FL 34240 City/State and Zip Code	
_	E-mail address: (to	554@ Yahoo. Co	cation)
For further information conce	rning this matter, please ca	11:	
Robert Jor	nes son	at (863) 781- Area Code Daytime	1423 Telephone Number
Enclosed is a check for the fo	llowing 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

TO ARTICLES OF ORGANIZATION OF

FILED 2015 DEC 28 AM 8: 42

Robert Jones Construction Lie Alexander Transported (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

<u>lity company here</u> :
ty Company," the designation "LLC" or the abbreviation "L.L.C."
1950 Bern Creek Loop
Sarasota, PC 34240
fice address on our records, enter the name of the new
:
Enter Florida street address
, Florida

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.

f Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Frank Pinder	1950 Bern Creek Lo	OP WAdd
		1950 Bern Creek Lo Saravota, FZ 34240	Remove
			Change
MGR	Jacob Pinder	1950 Bern Greek Lag Sarasota, FZ 34240	P MAdd
		Sarasota, FZ 34240	P □ Remove
			Change
			Add
			□ Remove
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And the state of t	William Control of the Control of th		🗅 Add
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		AND THE RESERVE OF THE PROPERTY OF THE PROPERT	Remove
			Change

Frank Pinder = 10% or Jacob Pinder = 10% or	wnership
Jacob Pinder = 10% or	unership

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fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior	(optional) to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	able statutory filing requirements, this date will not be listed as
·	
record specifies a delayed effective date, but no The 90th day after the record is filed.	t an effective time, at 12:01 a.m. on the earlier of
The both day after the record is filed.	
ated,	
Robert towar	
Signature of a member or author	orized representative of a member
Robert-Jones Typed or printe	
Typed or printe	ed name of signee

Page 3 of 3

Filing Fee: \$25.00