

114 000 113 868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

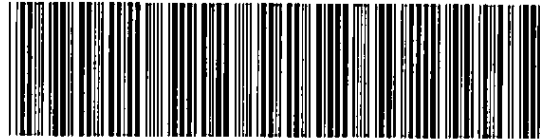
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/22/21--01012--011 \*\*25.00

FILED  
2021 OCT 22 PM 1:39  
CLERK OF COURT  
JANET L. BROWN

A. BUTLER

NOV 04 2021

# JenTana Home Inspections, LLC

October 19, 2021

Re: JenTana Home Inspections, LLC - L14000113868

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom it May Concern,

Please use the attached amendment form to change the Mailing Address and Registered Address for the above LLC. I was only able to change the Principal Address and title AMBR Address on SunBiz. If you have any questions regarding this request, feel free to call me at 352-585-3962.

Sincerely yours,

A handwritten signature in black ink that reads "Lois McDaniel". The signature is written in a cursive style with a large, stylized "L" and "M".

Lois McDaniel - AMBR

## COVER LETTER

**TO: Registration Section**  
**Division of Corporations**  
JenTana Home Inspections

**SUBJECT:** \_\_\_\_\_  
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:

John McDaniel

\_\_\_\_\_  
Name of Person

JenTana Home Inspections, LLC

\_\_\_\_\_  
Firm/Company

9446 E Gobbler Dr

\_\_\_\_\_  
Address

Floral City, FL 34436

\_\_\_\_\_  
City/State and Zip Code

LMcDaniel3@TampaBay.rr.com

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

For further information concerning this matter, please call:

John McDaniel

352

585-3962

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 210  
Tallahassee, FL 32310

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

JenTana Construction, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2021 OCT 22 PM 1:39

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 7/18/2014 and assigned  
Florida document number LL14000113868.

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 ADDRESS)**

9446 E Gobbler Dr

Floral City, FL 34436

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

9446 E Gobbler Dr

Floral City, FL 34436

**B. If amending the registered agent and/or registered office 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:

9446 E Gobbler Dr

Enter Florida street address

Floral City

Florida

34436

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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated October 19 2021

Signature of a member

Signature of a member or authorized representative of a member

John McDaniel

Typed or printed name of signee