

L14000165779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

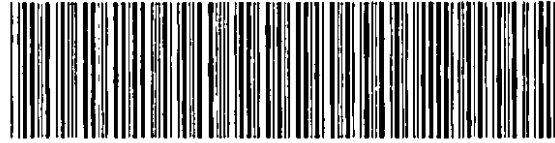
(Document Number)

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Special Instructions to Filing Officer:

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05/06/22--01001--012 **60.00

FILED RECEIVED

2022 MAY 16 AM 11:59 2022 MAY -5 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC
Attended

MAY 17 2022

D CONNELLY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 11, 2022

CORPORATE ACCESS INC.

SUBJECT: J & G EXPLOSIVES LLC
Ref. Number: L14000165779

RECEIVED
2022 MAY 16 PM 3:58
DIVISION OF STATE
TALLAHASSEE, FLORIDA

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 822A00010849

Corrected



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 MAY -9 AM 9:44
TALLAHASSEE, FLORIDA

May 6, 2022

CORPORATE ACCESS INC.

SUBJECT: J & G EXPLOSIVES LLC
Ref. Number: L14000165779

Corrected

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

~~The form you submitted is for a CORPORATION, but your entity is a LIMITED~~
LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document. We have no record of BRADFORD AND ASSOCIATES PA. We do have an active entity with a similar name. "BRADFORD AND ASSOCIATES, P.A. CERTIFIED PUBLIC ACCOUNTANTS" If this is the correct entity, please amend your document to reflect the full name.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 822A00010501

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: 5/5 DANNY

	CERTIFIED COPY	_____
XX	PHOTOCOPY	_____
	CUS	_____
XX	FILING	<u>LLC AMEND</u>

J AND G EXPLOSIVES, LLC

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

**CIAL
TRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J & G EXPLOSIVES, 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:

James N Bradford Jr

Name of Person

BRADFORD AND ASSOCIATES PA CERTIFIED PUBLIC ACCOUNTANTS

Firm/Company

14160 PALMETTO FRONTAGE RD STE 32

Address

MIAMI LAKES, FL 33016

City/State and Zip Code

BRADFORDCPA@BRADFORDCPA.COM

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

For further information concerning this matter, please call:

JAMES N BRADFORD, JR

Name of Person

at (305) 825-6286

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 810
Tallahassee, FL 32303

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

J & G EXPLOSIVES, LLC

(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 10/23/2014 and assigned
Florida document number L14000165779.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

BRADFORD & ASSOCIATES, P.A. CERTIFIED PUBLIC ACCOUNTANTS

New Registered Office Address:

14160 PALMETTO FRONTAGE RD STE 32

Enter Florida street address

MIAMI LAKES

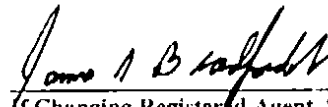
, Florida 33016

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.



James A. Bradford
If Changing Registered Agent, Signature of New Registered Agent

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

[illegible]

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

N/A

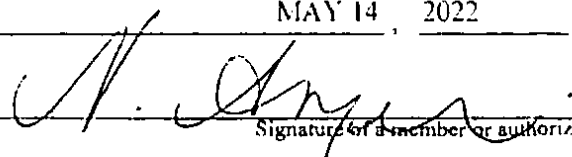
E. Effective date, if other than the date of filing: N/A (optional)

(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 MAY 14, 2022


Signature of a member or authorized representative of a member

VANESSA SHAWN ANGELINI

Typed or printed name of signer

Filing Fee: \$25.00