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To:

Division of Corporations

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From:

Account Name : SUPERBIZ.COM, INC.

Account Number : 120070000160 Phone : (800)494-3124 Fax Number : (305)675-2811

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J&E HAULING LLC

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Page Count	04
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SEP 11 2015

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

.:

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J&E HAULING LLC	
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company were filed on AUGUST 10,	2015 and assigned
Florida document numberL15000135236	
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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	जं
B. If amending the registered agent and/or registered office address on our records, registered agent and/or the new registered office address here:	enter the name of the nev
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Name of New Registered Agent:	
New Registered Office Address:	5.7 5
Enter Florida street address) 2 to 32
	orida
City New Pagistared Agent's Signature if changing Degistered Agents	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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	EDDIE HARRIS	9205 WAKULLA SPRINGS RD	
	* ** 11 8712 1 - 1114 *********************************		D Add
		TALLAHASSEE, FL 32305	Remove
			D Change
			D Add
			D Remove
			D Change
			D Add
			D Remove
			D Change
			PASS TI
		D ASS	
		<u> </u>	D.Change
			D Add
			D Remove
			D Change
			D Add
			D Remove
			D Change
			H15000217991 3

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Southern days. 10 calcomation also design (CCI).	(41)
ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9	(Optional) 90 days after filing.) Pursuant to 605 (
te: If the date inserted in this block does not meet the applicable statutory filing require	ements, this date will not be listed
cument's effective date on the Department of State's records.	ैं(ं) }
	±₩ 2
record specifies a delayed effective date, but not an effective time, at	t 12:01 a.m. on the earlier
he 90th day after the record is filed.	
	五
SEPTEMBER 09 2015	<u> </u>
bsor & losses	₹ 2 2
Signature of a member or abthorized representative of a mer	mber
JASON HARRIS	

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