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(Re	equestor's Name)			
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(Document Number)				
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## **COVER LETTER**

TO: Registration Se Division of Cor			
G & J Sites			
SUBJECT:		ited Liability Company	
	Amendment and fee(s) are sub-	_	
	Gary M Jackson Jr		
	<del></del>	Name of Person	<del></del>
	G & J Siteworks LLC		
	<del></del>	Firm/Company	
	12263 Mallory Drive	•	
	<del> </del>	Address	
	Largo, FL 33774		
		City/State and Zip Code	
	crcconsultingandservices@g		
For further information c	e-mail address: (to	o be used for future annual report notifi	cation)
Gary M Jackson Jr		727 366-1313	
Name o	f Person `	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

G & J Siteworks LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our record Limited Liability Company)	5.)
he Articles of Organization for this Limited Liability Corida document number	Company were filed on March 16, 2016	and assigned
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
ne new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC	"or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDI	ZESS)	
		Z <sub>S</sub>
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE BOX)		ALC ON FREE PROPERTY.
numing university in the party of the bong		77 2 11
	<del></del>	F STAT
. If amending the registered agent and/or regis egistered agent and/or the new registered office add		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	88
	978	
	, FI	orida

## 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Gary M Jackson Jr	12263 Mallory Drive	■ Add
		Largo, FL 33774	☐ Remove
			☐ Change
AMBR	Renee M Jackson	12263 Mallory Drive	■ Add
		Largo, FL 33774	Remove
			Change
		<del></del>	Add
			☐ Remove
		-	☐ Change
			□ Add
		\$18-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Remove
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<u>Note:</u> docum	ve date, if other than ective date is listed, the date If the date inserted in this ent's effective date on the cord specifies a delay 90th day after the sective date on the section of t	s block does not in the Department of S	meet the applicable st State's records. date, but not an (	atutory filing requiren	ienis, this date wi	il not be listed as
	May 13		2016			
Dated :	Day	ml				
		Signature of a	member or authorized i	epresentative of a memb	er :	76 78E
	Gary M Jackson Jr				بر ت	S MA
			Typed or printed nam	e of signee		3
			•	-	ir ir	6
			P 2 4	•		9 7 17
			Page 3 of	3	10 1	
			Filing Fee: \$		R:D	