## L16666 \$7569

(Requestor's Nam	ne)
(Address)	<del></del>
(Address)	
(City/State/Zip/Ph	one #)
, , ,	
PICK-UP WAIT	MAIL
(Duning and Fighthan)	do es a)
(Business Entity )	vame)
(Document Numb	er)
Certified Copies Certification	ites of Status
Special Instructions to Filing Officer:	
opeoid modulations to 1 ming officer.	
	1
L	

Office Use Only



500307604465

02/15/18--01012--028 \*\*55.00

18 FEB 15 PH 7: 09

FILED SECRETARY OF STATE TALLAHASSEE FLORIDA

## COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	·CT·	TJ Byilde	rs LL	<u>.</u>	
SUBJE		Name of Limite	d Liability Company	· · · · · · · · · · · · · · · · · · ·	
The en	closed Articles of	Amendment and fee(s) are subm	itted for filing.		
Please	return all correspo	ndence concerning this matter to	the following:		
		Terr	Wire	man	
		TJ B	uilders Firm/Company	LLC	
			Firm/Company	<del></del>	· <del>-</del>
		1525 5	Hopkins Address	Aue	
		Titus V	City/State and Zip C	32 <b>980</b>	
			City/State and Zip (	ode	<del>-</del> -
		<u>tjbuilde</u>	rsgroup!	wgmail	.com
				unai report nomical	ion)
For fur	ther information co	oncerning this matter, please call	:		
	Terri L	Diceman	at (32 ) Area Code	225 -49	158
	Name of	Person	Area Code	Daytime Te	lephone Number
Enclose	ed is a check for th	e following amount:			
□ \$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Certified Cop (additional copy	ķ	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio	ING ADDRESS: ation Section n of Corporations	Reg Divi	REET/COURIER is gration Section sion of Corporatio	
		ox 6327 ssee, FL 32314	266	ton Building 1 Executive Center ahassec, FL 32301	Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF** (Name of the Limited ed 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 5/4/16 Florida document number <u>LIGOOOS</u> 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) 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: Enter Florida street address Cin 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.

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

	Authorized Person(s) authorized to m from our records:	anage, enter the title, name, and address of e	he title, name, and address of each person being added					
MGR = M AMBR = A	fanager uthorized Member							
<u>Title</u>	Name	Address	Type of Action					
AMBR	Miguel Abal	Cocoa Fl 32927						
		Cocoa Fl 32927	Remove					
			☐ Change					
AMBR	Terr. Wireman	524 Bowman Blud						
		Cocoa F1 32927	☐ Remove					
			<b>☑</b> Change					
			□ Remove					
			☐ Change					
	<del></del>							
			□ Remove					
			Change					
	<del></del>							
			□ Remove					
			Change					
			Add					
			□ Remove					
			Change					

		cam i	ten	cem	ouin	M:9	uel	Abal	١.
	Ite	Fam j	rema-	~ re	ed t	& be	uel Chan	ged	
+	O AM							J 	
_1	Vew a	ddres	5						
		·			T				
					<del>                                     </del>			——— <b>≅</b>	
					<del>                                     </del>			833	
_		<u> </u>		<u> </u>	<u> </u>			<u> </u>	ı
					<del> </del>			3	,
_	<del></del> ,	<u> </u>						7: 09	0
						<del></del>			1,0
				<del> </del>					
				11-1		<i>(</i>			
effect	tive date is listed, t	than the date of he date must be spe	cific and cannot				filing.) Pursua		
		d in this block doo e on the Departm			atutory filing r	equirements, this	date will no	t be listed	. as
		1.1		<b></b>					
		delayed effect the record is		out not an e	errective tin	ie, at 12:01 a	.m. on the	eariier	O
	Cala	1 -	1,	×					
ted	reb	<u>له</u> ن ک		<u>)( 0</u>					
			ure of a member		enmeantative of	o mamhar	<del></del>		
		Signati	ne or a member	or addiorized i		а педиег			
		_	rr: Wi						

Page 3 of 3

Filing Fee: \$25.00