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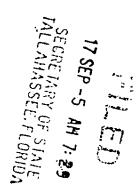
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COVER LETTER

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TO:	Registration Division of C	Section Corporations			
CHDH		BUILDING CONSULTANT LLC			
SUBJE		Name of Limi	ited Liability Company		
		of Amendment and fee(s) are sub-			
		JAIME SANCHEZ			
			Name of Person		
JA-SAN BUILDING CONSULTANT LLC					
Firm/Company					
		12413 RIVER RD			
Address					
		FORT MYERS, FL 33905			
			City/State and Zip Code		
		E-mail address: (t	o be used for future annual report notific	cation)	
For fur	ther informatio	n concerning this matter, please ca	11:		
JAIME	ESANCHEZ		954 608-3545		
	Nam	e of Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check fo	or the following amount:			
-⊡\$2:	5:00 Filing Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	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

JA-SAN BUILDING CONSULTANT 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 $\frac{11/02/2016}{1}$ and assigned Florida document number L16000202375 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 "L L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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 City 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

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	DIANA M. MONTOYA	12413 RIVER RD	
		FORT MYERS, FL 33905	Remove
			C Change
			□ Remove
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		Typed or printed name of signee			

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Filing Fee: \$25.00