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COVER LETTER

TO:	Registration Sec Division of Corp			
CHD 1E4		JP ENGINEERING LLC		
SUBJE	L1:	Name of Lim	ited Liability Company	
The encl	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ro	eturn all correspon	ndence concerning this matter	to the following:	
		Amy Marie Freeman		
			Name of Person	
		Attorney and Counselor at	Law	
			Firm/Company	
	7281 Taft St.			
			Address	
		Mentor OH 44060		
			City/State and Zip Code	
		amf@freemanlegaloffice.co		
		·	to be used for future annual report notifi	ication)
For furth	ner information co	oncerning this matter, please ca	all:	
Amy Ma	arie Freeman		440 670-9190	
	Name of	Person	at () Area Code Daytime	: Telephone Number
Enclosed	I is a check for th	e 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

MES GROUP ENGINEERING LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	.
The Articles of Organization for this Limited Liability C	Company were filed on 11/18/2016	and assigned
Florida document number L16000212310	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited 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 ADDR	RESSI	
		17 7 7 7 7 7 7 7 7 7
		89 X
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		The 1.000 C
		? 75
B. If amending the registered agent and/or regis	tered office address on our records, enter	the name of the new
registered agent and/or the new registered office add	ress nere:	C.
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida _	
	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.

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	Charles J. Flask	340 8th Ave N	■ Add
		Safety Harbor, FL 34695	☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
	<u> </u>		
			□ Remove
			☐ Change
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			Remove
			□ Change

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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing o	(optional) r more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this block does not meet the applicable statutory filment's effective date on the Department of State's records.	ling requirements, this date will not be listed
record specifies a delayed effective date, but not an effective the 90th day after the record is filed.	
And Dec 13 And The Free Company Signature of a member or authorized representation	

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee