11155000211

VOID			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			



300429062863

05/86/24--01030--003 **25.00

VOID



Office Use Only

This Name Change was voided because they had requested for it not to be filed and a note was put on reflections. They will be sending in a new application which will replace this filing.

dcc 07/11/24

COVER LETTER

TO: Registration Division of	n Section Corporations		•
J&A Co	onstruction & Renovation LLC		
SOBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub-	omitted for filing.	VOID
Please return all corre	spondence concerning this matter	to the following:	
	Andrew J Matella		
	 	Name of Person	••
	J&A Construction & Rend	ovation LLC	
		Firm/Company	
	4327 South Highway 27 S	Suite 607	
		Address	
	Clermont, FL, 34711		
		City/State and Zip Code	·· -
	Admin@jaconstructiontl.co	om	
	E-mail address: ((to be used for future annual report no	tification)
For further information	on concerning this matter, please c	rall:	
Andrew J Matella		850 321-4774	
Nan	ne of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for	or the 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		<u>Street Address:</u> Registration S	ection
Division of Corporations		Division of Co	
P.O. Box 6		The Centre of	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VOID

assigned
assigned
"L.L.C."

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

VOID

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐Change
			□Remove
		<u></u>	
			□Remove
			□Change
			\ \ \ \ \ \
			□Remove
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			□Add
			□Remove
			□Change

ii amending any other miorina	ation, enter change(s) here: (Attach additional sheets, if nec	VOI
		
		<u> </u>
Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	st be specific and cannot be prior to date of filing or more than 90 days afte lock does not meet the applicable statutory filing requirements, thi	r filing.) Pursuant to 605,0207 (3)
e record specifies a delayed effectived is filed.	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b	n) The 90th day after the
Dated March 4th	2024	
11/2		
	Signature of a member or authorized representative of a member	
Andrew J Matella, as M		
	Typed or printed name of signee	