## L17000 149410

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

Office Use Only





100393051631

09/01/22--01018--007 \*\*55.00

THE TOTAL OF STATE OF

## **COVER LETTER**

TO:	Registration Sec Division of Corp		,	ě		
	James Harris	s Drywall, LLC	·			
SUBJI	ECT:	Name of Limit	ed Liability Company			
The en	closed Articles of A	Amendment and fec(s) are subn	nitted for filing.			
		ndence concerning this matter to				
		James Harris				
			Name of Person	<del></del> _		
		James Harris Drywall, LLC			22 9	- - -
			Firm/Company	<del>-</del>	SEP	<u>.</u>
		6505 SE Hwy 42			22 SEP -1	HOLLY DANGED AN MOUSTAIN
			Address	<del></del>	PH 2:	49 CE
		Summerfield, Fl 34491			2: 10	HOH 14
		jhdrywall3@gmail.com	City/State and Zip Code			
			o be used for future annual report notifica	tion)		
For fu	orther information c	oncerning this matter, please ca	ill:			
Mich	elle Harris		352 427-8081			
	Name o	l' Person	Area Code Daytime To	elephone Number		
Enclo	sed is a check for the	he 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 State Certified Copy (additional copy is enc		
	<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Secti	on		
		Companions	Division of Corpe			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

James Harris Drywall, LLC	it - company of our records	
(Name of the Limited Liability Compan (A Florida Limited Lia	ability Company)	
The Articles of Organization for this Limited Liability Company value document number L17000149410	vere filed on July 12, 2017	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
he new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N =:
Principal office address MUST BE A STREET ADDRESS)		Z SEP
		<u> </u>
Enter new mailing address, if applicable:		<u>구</u> 위신
(Mailing address MAY BE A POST OFFICE BOX)		
		<del></del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floric	laZip Code
	Cïţy	Zip Coue

## 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 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>	Address	Type of Action
MGR	Michelle Harris	6505 SE Hwy 42 Summerfield, Fl 34491	■Add
			□Remove
			□Change
			🗆 Add
			Remove
			22 Topics Constitution of the constitution of
			22 PH 2: 10 Change
			□Change
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			□Remove
			□ Change

		<del>-</del>				
<del></del>					<del></del>	
<u></u>		<del>_</del>	<del></del>			
					<del></del>	
	<u> </u>	<del></del>		<u> </u>	_	
		<del> </del>				
			. <del>.</del>	_ <del>_</del> .		
						22 22
						SEP
						1 2
		_				<del></del> %
						<i></i>
			<u>.</u>	<u> </u>	<u>-</u>	<u></u>
		<u> </u>	<u>.</u>		<u> </u>	
fective date, if othe	r than the date of	filing: August	29, 2022		_ (optional)	
ote: If the date insert	ed in this block does	s not meet the ap	oplicable statutor	ng or more than 90 ry filing requiren	days after filing.) Pu ents, this date wil	rsuant to 605.020 I not be listed a
ocument's effective da	te on the Departme	nt of State's reco	ords.			
record specifies a dela	ved effective date. F	out not an effect	ve time, at 12:01	a.m. on the earl	ier of: (b) The 9	Oth day after the
is filed.	, ed effective dute, o	at not an origin.			(-,	•
is med.		2022				
Ammet 20						
Ammet 20		—; <del>,                                    </del>	·			
		- 1	·	entative of a memb		