

L17000243978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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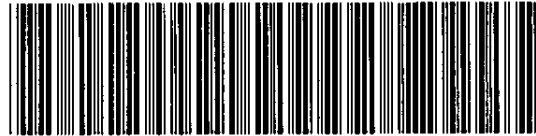
(Business Entity Name)

(Document Number)

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MAR 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sand J Flooring, Painting, Carpentry LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven F Clemons JR
Name of Person

8464 Lake Atkinson
Address

Tall Fl. 32310
City/State and Zip Code

SteveClemonsJR@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for 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
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

Sand J Flooring, Painting, Carpentry 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 3/23/18 and assigned
Florida document number L17000243918.

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

Florida

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 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

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2018 MAR 20 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR = Manager
AMBR = Authorized Member

manager	Steve Clemens JR	8464 Lake Clifton	Add <input checked="" type="checkbox"/>
		Dr. Tall. Fl. 32310	<input type="checkbox"/> Remove

2000 MAR 20 AM 10:50
SECRETARY OF STATE
ADJUTANT GENERAL
WASHINGTON, DC 20520-5000

FILED

☐ Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated

3/23/18

Signature of a member or authorized representative of _____

Signature of a member or authorized representative of a member

Steven F Clemens JR.
Typed or printed name of signer

Typed or printed name of signee

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2018 MAR 20 AM 10:51
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TALLAHASSEE, FLORIDA