

H180003007223
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H190003007223))



H190003007223ABCV

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : ITAX GROUP, LLC
Account Number : I20140000115
Phone : (813)882-8426
Fax Number : (813)884-0263

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: JF PAVERS @ GMAIL . COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JF PAVERS LLC**

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

T GLASS
Help
OCT 10 2019

COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT:** JF PAVERS 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:

CARLOS MARCELO GARCIA DO CARMO

Name of Person

JF PAVERS LLC

Firm/Company

2641 FLOURNOY CIR N APT 9409

Address

CLEARWATER - FLORIDA - 33764

City/State and Zip Code

JF PAVERS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS MARCELO GARCIA DO CARMO

813 280 3019
at ()

Name of Person

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

2019 OCT -9 PM 4:01

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JF PAVERS 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 02/26/2018 and assigned
Florida document number L18000050873

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**)

2641 FLOURNOY CIR N APT 9409

CLEARWATER / FLORIDA

33764

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

2641 FLOURNOY CIR N APT 9409

CLEARWATER / FLORIDA

33764

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:

BRUNA TORRES CAMILLO PIRFS

New Registered Office Address:

2641 FLOURNOY CIR N APT 9409

Enter Florida street address

CLEARWATER / FLORIDA

Florida 33764

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.

Bruna Pires

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>	<u>Type of Action</u>
MGR	BRUNA TORRES CAMILLO PIRES	2641 FLOURNOY CIR N #9409 CLEARWATER/FL 33764	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CARLOS MARCELO GARCIA DO CARMO	2641 FLOURNOY CIR N #9409 CLEARWATER/FL 33764	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2019 OCT -9 PM 4:01

2019 OCT-9 PM 4:01

Figure 1

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 10/09 2019


CARLOS MARCELINO

Signature of a member or authorized representative of a member

CARLOS MARCELO GARCIA DO CARMO

Typed or printed name of signee