

L19000085238

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(Business Entity Name)

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MAY 20 2019

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2019 MAY -7 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

*Handwritten signature*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J&M Quality Building Group 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:

Mario Martinez  
Name of Person

J&M Quality Building Group LLC  
Firm/Company

262 Arlington Loop  
Address

Haines City, FL 33844  
City/State and Zip Code

mmartinez0824@yahoo.com ✓  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario Martinez at ( 407 ) 334-3620  
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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

J&M Quality Building Group 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 3/27/2019 and assigned Florida document number L19000085238

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)

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TALLAHASSEE FL

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*

*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>	<u>Type of Action</u>
<u>AR</u>	<u>Karla M Martinez</u>	<u>262 Arlington Loop</u>	<input type="checkbox"/> Add
		<u>Haines City, FL 33844</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AR</u>	<u>Maria G Alcala</u>	<u>381 Arlington Circle</u>	<input type="checkbox"/> Add
		<u>Haines City, FL 33844</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Jesus A Alcala</u>	<u>381 Arlington Circle</u>	<input type="checkbox"/> Add
		<u>Haines City, FL 33844</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>MGRM</u>	<u>Mario Martinez</u>	<u>262 Arlington Loop</u>	<input type="checkbox"/> Add
		<u>Haines City, FL 33844</u>	<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
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. On the left side, there is a vertical margin line, creating a narrow left margin. A small portion of a yellowed piece of paper is visible at the top edge.

**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 May 2, 2019

Signature of a member or authorized representative of a member

Typed or printed name of signee