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Certified Copies	_ Certificates	of Status
Special Instructions to	Elling Officer:	
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COVER LETTER

TO:

Tallahassee, FL 32314

	tration Section of Corp				
	& I MILLV	VORK			
SUBJECT: _		Name of Lim	ited Liability Company		
The enclosed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return a	ll correspon	ndence concerning this matter	to the following:		
		ALEXANDRA LOZANO			
			Name of Person		
			Firm/Company		
		8305 W ATLANTIC BLV	D		
			Address		
		CORAL SPRINGS, FL 3	3071		
			City/State and Zip Code		
		MAXI8317@AOL.COM	to be used for future annual	report notification)	
For further infe	ormation co	ncerning this matter, please c		,	
ALEXANDRA	LOZANO		954 224 at ()	1-2348	
	Name of	Person	Area Code	Daytime Telephone N	umber
Enclosed is a c	heck for the	e following amount:			
□ \$25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enci	Cer losed) Cer	.00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)
	ng Address		Street Ad		
Registration Section Division of Corporations			ition Section of Corporations		
	Roy 6327			tre of Tallahacco	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J & I MILLWORK LLC	
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our records.) la Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L19000118438	Company were filed on 05/01/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
J & M MILLWORK LLC	N
The new name must be distinguishable and contain the words "Lim	mited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	RESS)
-	
	5 5 7
Enter new mailing address, if applicable:	: 3 0
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere	ed office address on our records, enter the name of the new regist
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
. 15	Enter Florida street address
	, Florida
	City Zin 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>	Address	Type of Action
AMBR	MELITZA VAZQUEZ	9999 SUMMERBREEZE DR, APT 914	= Add
		SUNRISE, FL 33322	□Remove
			Change
	 -	_	🗖 Add
			□Remove
		□Change	
	_	□Add	
		□Remove	
		□Change	
		□Add	
			□Remove
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			□ Remove
			□Change

Effective date, if other than the date of filing: [(optional)] If an effective date is bisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records. 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 ris filed.	•
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	r the
Dated May 11 , 2023 .	
Dated May 11 , 2023 . Signature of a member or authorized representative of a member	
Alexandra Wisano. Typed or printed name of signee	

 $(x_1, \dots, x_{n-1}, \dots, x_n) = (x_1, \dots, x_n) \in \mathbb{R}^n \times \mathbb{R}^n$

Filing Fee: \$25.00