L19000124650

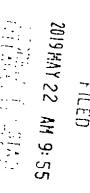
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COVER LETTER

TO:	Registration Se Division of Cor		a .	
SUBJI	Jewboy Co	nstruction LLC		
SUBJI		Name of Limite	d Liability Company	
The en	closed Articles of	Amendment and fee(s) are submi	tted for filing.	
Please	return all correspo	ndence concerning this matter to	the following:	
		Wandisa Brown		
			Name of Person	-
		Jewboy Construction		
			Firm/Company	201
		184 Florida Ave		2019 HAY 22
		_	Address	Y 22
		Moore Haven, FL 33471		
			City/State and Zip Code	- <u></u>
		E-mail address: (to	be used for future annual report notification)	. 5
For fur	ther information c	oncerning this matter, please call	:	
Wand	isa Brown		863 677-5249	
	Name o	f Person	Area Code Daytime Telephone Number	
Enclos	ed is a check for th	e following amount:		
■ \$ 2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ation Section n of Corporations ox 6327	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

Jewboy Construction	
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Imited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number L19000124650	mpany 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 limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRI	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registeredistered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	Pared office address on our records, enter the name of the new ess here: Enter Florida street address
	. Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered	Agent:
provisions of all statutes relative to the proper and co accept the obligations of my position as registered ago	nd agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is doffice address, I hereby confirm that the limited liability
	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

Title	<u>Name</u>	<u>Address</u>	Type of Action
P	Vilroy Brown	184 Florida Ave NW Moore Haven, FL 33471	■ Add
			□ Remove
			□ Change
			D Add
			□ Remove
			Change
			Add
			APPROVE AND Change
			PRemove APPROVE
			
			□ Remove
			Change
_			Add
			☐ Remove
			Change
			☐ Remove
			Change

D. If amending any other information, enter change(s)	here: (Attach additional sheets, if necessary.)
	
	
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E. Effective date, if other than the date of filing:	(optional) prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b
	pplicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but (b) The 90th day after the record is filed.	t not an effective time, at 12:01 a.m. on the earlier of:
Dated May, 17th 2019	
<u>Nandva Brown</u> Signature of a member or	authorized representative of a member
Wandisa Brown	
Typed or	printed name of signee
1	 Page 3 of 3

Page 3 of 3

Filing Fee: \$25.00