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CHEARTMENT OF STATE
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OF ALL ANASSEE FOR DRING

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COVER LETTER

	tion Section of Corporations
0 T I T T T T T T T T T T T T T T T T T	Manufacturing, LLC
30BJEC1:	Name of Limited Liability Company
	eles of Amendment and fee(s) are submitted for filing.
Please return all co	prrespondence concerning this matter to the following:
	Tricia Harris
	Name of Person
	LJE Manufacturing, LLC
	Firm/Company
	3035 NE 37th Place
	Address
	Wildwood, FL 34785
	City/State and Zip Code
	tricia@ljemfg.com E-mail address: (to be used for future annual report notification)
For further inform	ation concerning this matter, please call:
Tricia Harris	352 516-8847
1	Name of Person Area Code Daytime Telephone Number
Enclosed is a check	k for the following amount:
■ \$25.00 Filing	Fee Solution free & Solution f
_	Address: Street Address: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

 \sim

LJE Manufacturing, LLC			A SECTION OF THE SECT	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on outed Liability Company)	our records.)	TO SECOND	
The Articles of Organization for this Limited Liability Comp	pany were filed on $\frac{09/25/2}{}$	019	्रिकार्त assi	gned TT
Florida document number L19000242663			(F)	
This amendment is submitted to amend the following:			Cand assi	39
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 I	Liability Company," the design	ation "LLC" or th	e abbreviation "L.L	C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u> </u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered off agent and/or the new registered office address here: Name of New Registered Agent:	ice address on our recor	ds, <u>enter the n</u>	ame of the new	registere
New Registered Office Address:				
	Enter Florida st	reet address		
		Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Ag	<u>gent:</u>			
Thereby accept the appointment as registered agent and	agree to act in this cana	cin I further	aoree ta campi	wwith 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MESSE MGR	Tricia Harris	3035 NE 37th Place	
·		Wildwood, FL 34785	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other that if an effective date is listed, the date. If the date inserted in document's effective date on	uns block does r	ioi meet ine appi:	cable statutory in	(option of more than 90 days after ling requirements, this	nal) filing.) Pursuant to 605,0207 date will not be listed as
e record specifies a delayed e d is filed.	ffective date, but	not an effective	time, at 12:01 a.r	n, on the earlier of: (b)	The 90th day after the
Dated December 16th		2019	·		
^	11 4				
<u> Fricia</u>	Havris	of a member or auti	· · · · · · · · · · · · · · · · · · ·	_	

Filing Fee: \$25.00