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COVER LETTER

TO:

	ation Sec n of Corp	ction porations		
CUDIECT.	J. R.	ANDALL SERVICES, LLC.		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all	correspor	ndence concerning this matter	to the following:	
		AVIS A GRAVITT		
			Name of Person	" •
		J. RANDALL SERVICES.	LLC.	
			Firm/Company	
		2250 CHAFFEE RD S		
			Address	
		JACKSONVILLE, FL 322	21	
			City/State and Zip Code	
		jrandallservices l@gmail.co		
		E-mail address: (to be used for future annual report not	tification)
For further infor	mation co	oncerning this matter, please co	alt:	
RANDALL J G	RAVITT		904 422-3000 at ()	
	Name of	Person	Area Code Daytir	ne Telephone Number
Enclosed is a che	eck for th	e following amount:		
□ \$25.00 Filin	g Fec	☐ \$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)
	Address		<u>Street Address:</u> Registration Se	ection
_		orporations	Division of Co	rporations
	30x 632		The Centre of	
Tallah	iassee, F	L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J. RANDALL SERVICES, LLC.		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number	y were filed on NOVEMBER 22, 2019	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	2020 J
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the a	bbreviation "L.L.C."
inter new principal offices address, if applicable:		- TI
Principal office address MUST BE A STREET ADDRESS)	(f) 	
		in the second se
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the nan	ne of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	zip Coae

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 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>	Type of Action
MGR	RANDALL J GRAVITT	2250 CHAFFEE RD S	□Add
		JACKSONVILLE, FL 32221	□ Remove
		_	□Add
			S Remove
			PH 43 Remove
		-	FITE DRemove
		-	□ Change
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ffectiv	e date, if other than the da	te of filing	02/01/2020)		(4	ptional	h		
an effec	ctive date is listed, the date must be f the date inserted in this block	specific and	l cannot be prio			than 90 days	after filin	g.) Pursu		
	nt's effective date on the Depa				iory ming re	quirements	, uns dat	e will ii	or oc us	icu as
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Filing Fee: \$25.00