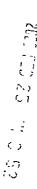
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(Red	questor's Name)	
(Add	dress)	
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Certified Copies	_ Certificates	of Status
Special instructions to f		

Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp		ø	
SUBJECT: JOV	res Constr	uction LLC ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
		Name of Person	
	Jones Co	Sustruction LL	۷
	PO BOX	664 Havana Address	Flori da
		City/State and Zip Code	2333
	VCTA		
	E-mail address: (VC+ZETO.COM to be used for future annual report notific	cation)
For further information co.	ncerning this matter, please ca	all:	
Kenneths	Jones	at (<u>850</u>) <u>2/2</u> Area Code Daytime	6604
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	S30.00 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:	<u>:</u>	Street Address:	
Registration Se		Registration Sect	
Division of Co P.O. Box 6327	•	Division of Corp The Centre of Ta	
Tallahassee, F		2415 N. Monroe	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company Florida document number <u>L190003067</u> 22	were filed on $12 - 30 - 2019$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3350 Fairbanks Ferry Road Havana Florida 32333
(Principal office address MUST BE A STREET ADDRESS)	Havana Florida 32333
Enter new mailing address, if applicable:	PO BOX 664 Havana Florida
(Mailing address MAY BE A POST OFFICE BOX)	PO BOX 664 Havana Florida 32333
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
· April 1	
New Registered Agent's Signature, if changing Registered Agent:	•
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agrowisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and is provided for in Chapter 605, F.S. Or, if this discume <u>nt is</u>

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
MGR_	Kerwyn Jones - Wilson	433 Canopylane Quincy	FL □Add
			Remove
MGR	Kenneth's Jones Jr	433 Canopy lane Quino	YF1 □Add
			E Remove
			Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			🗆 Change
,. <u>.</u>			□Add
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		-	□Change
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			□Remove
			□Change

					
					
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	d, the date must be spec ted in this block doe	erfic and cannot be prices not meet the appli	or to date of filing or mo icable statutory filing	ore than 90 days after f	nal) ling.) Pursuant to 605,0207 date will not be listed as
e record specifies a del rd is filed.	ayed effective date, I	but not an effective	time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
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		202E) ·		
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	meth S (2028 Love 3 c re of a member or aud) 	of a member	

Filing Fee: \$25.00