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COVER LETTER

Tallahassee, FL 32314

TO:

TO: Registration S Division of Co			
	JE CONSTRUCTION LLC		
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JUAN GONZALEZ		
		Name of Person	
		Firm/Company	
	80 MC DAVIS LOOP UN	FIT 1207	
	SANTA ROSA BEACH.	FI. 32459	
	HANSFORD@ADVANCE	City/State and Zip Code EDTAXINC.COM	
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report noti	fication)
JUAN GONZALEZ		850 830-3327	
Name (of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$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)
Mailing Address Registration		Street Address:	otion
Division of C	Corporations	Registration Sec Division of Cor	porations
P.O. Box 6327		The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

30 AVENUE CONSTRUCTION LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Climica I	rannin's Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000056138	were filed on 02/19/2020	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
GONZALEZ HOME BUILDERS & REMODELING LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable: 80 MC DAVIS LOOP UNIT 1207		7
(Principal office address MUST BE A STREET ADDRESS)	SANTA ROSA BEACH, FL 324	59
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		2(12)
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	3
	Florida	
	Ciţy	Zip 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 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
			□Add
			□Remove
			□Change
			□Add
			Remove
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Defective date.	the specific and cannot be prior ock does not meet the application.	able statutory filing require	(optional) 0 days after filing.) Pursuant to 60 ments, this date will not be lis	5.0207 (ited as t
record specifies a delayed effectived is filed.	e date, but not an effective tir	ne, at 12:01 a.m. on the ea	rlier of: (b) The 90th day afte	er the
	2021			
Dated		·		
Dated	Au a		h.u.	