## 1200000 95542

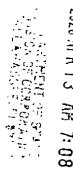
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APR 2 4 2020 S. YOUNG

## **COVER LETTER**

CTID ID COO.	y & Development Services, LL	С				
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Israel Evans					
		Name of Person				
	E J Property & Developme	ent Services, LLC				
		Firm/Company				
	19046 Bruce B. Downs Bl	vd. 1297				
		Address				
	Tampa, Florida 33647					
	City/State and Zip Code					
	sales@EJPDS.com					
	E-mail address: (	to be used for future annual report noti-	fication)			
For further information c	oncerning this matter, please co	all:				
Israel Evans		813 458-3544 at ()				
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	ne following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres Registration S		Street Address: Registration Sec	rtion			
Division of C		Division of Cor				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

**Division of Corporations** 

TO:

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E J Property & Development Services, LLC		ecords.)
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our r	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number L20000095542  This amendment is submitted to amend the following:		5 a L
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>c</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street d	ddress
	City	_, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City	zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dution of the provided for in Chapter (	es, and I am familiar with and 605, F.S. Or, if this document is

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
AMBR	Valery Jacques	19046 Bruce B. Downs Blvd. #1297	<b>=</b> Add
		Tampa, Fl. 33647	□Remove
		Please see D. below for description of change	\= Change
			□Add
			□Remove
			□Change
<u></u>			□Add
			□Remove
			□ Change
		·	□Add
			□Remove
		<del></del>	□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

18	ke to keep my name in the 1st position and change Valery Jacques to the second position under Article IV.
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e	April 02, 2020
in effi ote:	ve date, if other than the date of filing:
ecore	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ited .	April 07, 2020
nea .	

Typed or printed name of signee