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	egistration Sec ivision of Corp						
1	J. O EFFICIENCY CONSTRUCTION LLC						
SUBJECT: Name of Limited Liability Company							
1							
The enclos	ed Articles of a	Amendment and fee(s) are sub-	mitted for filing.				
Please retu	m all correspo	ndence concerning this matter	to the following:				
1		JOHELYNA A ORDONEZ	Z				
ŧ			Name of Perso	'n			
;		J. O EFFICIENCY CONST	TRUCTION LLC				
			Firm/Compan	y	<del></del>		
		12208 ACCIPITER DR					
		<del></del>	Address	-	<del>-</del>		
1		ORLANDO FL 32837					
			City/State and Zip				
1 •		JO.EFFICIENCYCONSTRU E-mail address: (1	UCTION@GMAIL to be used for future a		eation)		
For further	information co	oncerning this matter, please co	ıll:	·			
JOHELYN	VA ORDONEZ	Z	407 at (	4287150			
	Name of	Person	Area Code	Daytime	Telephone Number		
Enclosed is	s a check for th	e following amount:					
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Co (additional copy	ру	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
R D P	Iailing Address egistration S vivision of Co.O. Box 632 allahassee, F	Section orporations - 7	Re Div The 24	eet Address: gistration Sect vision of Corp e Centre of Ta 15 N. Monroe Hahassee, FL 3	orations llahassee Street, Suite 810		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J.O EFFICIENCY CONSTRUCTION LLC	
( <u>Name of the Limited Liab</u> (A Flori	oility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on 04/29/2020 and assigned
lorida document number L20000116872	<u> </u>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the light	mited liability company here:
i	<b>~</b> 3. ·
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Entoú nom naimeiral offices address if smalischla	
Enter new principal offices address, if applicable:	2
Principal office address MUST BE A STREET ADL	
	mo =
Enter new mailing address, if applicable:	<b>59</b>
Mailing address MAY BE A POST OFFICE BOX)	
1	
	red office address on our records, enter the name of the new regis
gentland/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
isen registered Office Address,	r rt
New Registered Office Address.	Enter Florida street address
New Registered Office Address.	Enter Florida street address  Florida  City  Zip Code

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
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fan effective date, if other than the da fan effective date is listed, the date must b	ate of filing	g:			(optio	nal)		
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document's effective date on the Dep	irtment of S	tate's record	S.					
record specifies a delayed effective of is filed.	iate, but not	an effective	time, at 12:0	l a.m. on the ea	rlier of: (b)	The 90	th day a	ifter the
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