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JASA MADA

COVER LETTER

	gistration Secision of Cor						
ove incor	J&JRENO	OVATIONS AND MAINTEN	ANCE LLC	•	w		
SUBJECT:		Name of Limi	ited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		JUAN TOMAS					
			Name of Person				
		J & J RENOVATIONS AN	ND MAINTENANCE LLC		138	202	
			Firm/Company			2021 AUS	Ĭ
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			City/State and Zip Code		ान	9	
		TJUAN48@ICLOUD.COM			-		
		E-mail address: (to be used for future annual report no	otification)			
For further i	nformation c	oncerning this matter, please ca	all:				
JUAN TOM	IAS		561 284-0016 at ()				
	Name o	f Person	Area Code Dayti	me Telephone Numb	oer		
Enclosed is	a check for th	ne following amount:					
☐ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fe cate of St ed Copy nal copy is c	atus &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&J renovations and maintenance LLC

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document numberL20000272729	ny were filed on September 1, 2020	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
J&J HOME RENOVATIONS/REPAIRS LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the abbre	viation "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) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	STAT	2021 ALG -7 Phe new registered 2:
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	, Florida	
		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
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			□Remove
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-ten	Signature of a membe					