LZ00003Z1970

(F	Requestor's Name)			
	Address)			
(/	Address)			
(6	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(1)	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



000358071220

01/19/21--01011--025 **25.00

2021 JAH 19 PH 2:53

JA. 2/19/21

COVER LETTER

	Registration Se Division of Cor			
eub iez	JC EVANO	CLLC		
SUBJEC	.1: <u></u>	Name of Limited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		JAMHOI CARLTON CA	RIM EVANS	
			Name of Person	
		JC EVANS LLC		
			Firm/Company	
		5349 SOUTHWICK DR		
		_	Address	
		TAMPA, FL. 33624		
			City/State and Zip Code	
		JCARIMEVANS@GMAIL E-mail address: (COM to be used for future annual report no	stification)
For furth	er information c	oncerning this matter, please c	-	
JAMHO	LEVANS		813 357-7239	
	Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed	is a check for the	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 S Division of C	Section	Street Address: Registration S Division of Co	

P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JC EVANS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{10/12/2020}{10/12/2020}$ and assigned Florida document number L20000321970 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) $\frac{\sigma}{\omega}$ B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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 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	KRISTINA EVANS	5349 SOUTHWICK DR	
		TAMPA, FL. 33624	□Remove
			□Change
			□Add
			□Remove
			□ Change
		_	□ Add
			□Remove
			Change
			□Remove
		-	□ Change
			□Add
			□Remove
		-	Change
	 .		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			🗆 Remove

). If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
Effective	date, if other than the date of filing: (optional)
(If an effective Note: If t	we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
he record spord is filed.	secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Juitin Jan
	Signature of a member or authorized representative of a member
	KRISTINA EVANS
	Typed or printed name of signee

. . . .

Filing Fee: \$25.00