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APRION OF CONTRACTOR

COVER LETTER

Division of Corp	oorations			
SUBJECT: J&R	Transportation Name of Lin	nited Liability Company	i prilipted i poidaux	ರ
The enclosed Articles of A	Amendment and fec(s) are sub	omitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	Janeel	W199Gn Name of Purson		
	J. R. Frans	poddion and Firm/Company Suc	Power washing bedoiling	8'
	2263 Wes	f New Haven	ave	
	West melt	City/State and Zip Code to be used for future annual report notion	32904 28 19 19 19 19 19 19 19 19 19 19 19 19 19	
For further information co	ncerning this matter, please c	all:	PH (1874)	
Janeek	Person SCO	at (<u>63.1</u>) <u>88.5</u> Area Code Daytime	- 770 T e Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$\ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
M 70 A 4 4		C		

TO: . Registration Section

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

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J. R. transportation, and R. (Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our neords.) Liability Company)	ling ic	leaning
The Articles of Organization for this Limited Liability Company Florida document number <u>L2\00038538</u>	y were filed on 01/19/2021	and assi	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial The New name must be distinguishable and contain the words "Limited Liab	JLLC	bbreviation "LL	C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2263 West Ne West Melborn		Jen Au 32904
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2263 West Ne West melbourn	ew Ho ne FL	wen A .3290
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	ne of the new	registered
Name of New Registered Agent:		22 AU	1. 55. 50.
New Registered Office Address:		6 1 9	SE
	Enter Florida street address	PK	
	, Florida	Zip Co&	3.5.

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

New Registered Agent's Signature, if changing 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>	<u>Address</u>	Type of Action
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 603 ements, this date will not be list	5.0207 ted as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	arlier of: (b) The 90th day afte	er the
d is filed.	·	
Pated		
Signature of a member or authorized representative of a mem	nber	