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(Requestor's Name) (Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Se Division of Cor			
	TRUCTION AND CLEANIN	G LLC	
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	BLECT: Same of Limited Liability Company		
Please return all correspo	ondence concerning this matter	to the following:	
	JORGE L. CHINCHILLA	VILLAMIL	
		Name of Person	
		Firm/Company	
		Address	
	535 CORONADO PL		
	PANAMA CITY, FL, 3241	•	
			tion)
For further information e	oncerning this matter, please c	all:	
ORGE L. CHINCHILLA VILLAMIL			
Name o	f Person		elephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corpo The Centre of Tall 2415 N. Monroe S Tallahassee, FL 32	on PP 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JLA CONSTRUCTION AND CLEANING 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 03/08/2021 ____ and assigned Florida document number $\underline{L21000108722}$ 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) 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

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 fantiliar 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.

City

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>	<u>Address</u>	Type of Action
AMBR	JORGE L. CHINCHILLA VILLAN	535 CORONADO PL	■Add
		535 CORONADO PL	□Remove
		<u> </u>	□Change
AMBR	LILIANA A. GUERRA RAMIREZ	535 CORONADO PL	= Add
		535 CORONADO PL	□Remove
			□Change
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reffective date is listed, the date must te: If the date inserted in this blo	ock does not meet the applica	ble statutory filing re	man 90 days after filing. quirements, this date	will not be listed as
rument's effective date on the De	partment of State's records.			ם 📜
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cord specifies a delayed effective s filed.	date, but not an effective tin	ae, at 12:01 a.m. on th	he earlier of: (b) Th	16190th day after the
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ed APRIL. 13TH	2021 An Challe Signature of a member or author			