## L210001729C4

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

Division of Corpo	orations		
SUBJECT: JCB	Renovator Name of Lin	ns LLC mited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are su	bmitted for filing.	
Please return all correspond	lence concerning this matte	r to the following:	
		C. Canales Name of Person	
	JCB Re	novatons LLC Firm/Company	<del></del>
	2430	Thomas ST Address	
-	JCBRENOVAT	City/State and Zip Code	n fication)
For further information conc			
Jan Co Name of Pe	conciles	at ( <u>305</u> ) <u>467-69</u> Area Code Daytime	245 c Telephone Number
Enclosed is a check for the f	offowing amount:		
<b> ■</b> \$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:		Street Address	

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

TO:

Registration Section

<u>Street Address:</u>

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

Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appears on our records.) Lability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/14/2021	and assigned
Florida document number <u>L 21000172404</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
JCB Renovations L.L.C. The new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the new name must be distinguishable an	ty Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name	of the new registered
Name of New Registered Agent:		
New Registered Office Address:		` ~>
	Enter Florida street address	72
	, Florida	~3 1
New Registered Agent's Signature, if changing Registered Agent:	( IÙ.	Zip Code
	· · · · · · · · · · · · · · · · · · ·	· 3
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as public filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	performance of my duties, and I am for rovided for in Chapter 605, F.S. Or; i	mili <del>u</del> r with and f this document is

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
			⊐Add
			Петюvе
			□Add
			□Remove
			□Change
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fective date, if other than the date of filing:  (optional)  In effective date is listed, the date must be specific and current be prior to date of filing or more than 90 days offer filing.) Pursuant to 605.026  Its: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a current's effective date on the Department of State's records.  Executed specifies a delayed effective date, but not an effective time, at 12.01 a.m. on the earlier of: (b) The 90th day after the is filed.  Signature of a member or authorized representative of a member.					
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	<del></del>	Signature of a mem	ber or authorized repr	esentative of a member	
Jan C. Canales Typed or printed name of signee		~			