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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT: JB	FLOORING	LLC	• .
SUBJECT: <u>~ · · · · · · · · · · · · · · · · · · </u>	Name of Limit	ted Liability Company	 _
The enclosed Articles of	f Amendment and fee(s) are subn	nitted for filing.	
Please return all corresp	ondence concerning this matter t	o the following:	
·	•	v	
	JEFFREY	W BARNES Name of Person	SR
		Firm/Company	
	4731 HIL	DEN FOREST	LN
		Address	
	_ JAKHSOT	7A FL 3423	5
		City/State and Zip Code	
	r 11 - 44 //		
		o be used for future annual report notifi	cation)
	concerning this matter, please ca		
JEFFREY	BARNES CE	at (941) 228- Area Code Daytime	-690G
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	the following amount:		
	_	E escential in a	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	tion
Registration Division of 0		Registration Sec Division of Corp	
P.O. Box 63		The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION, OF

JB FLOORING LLC

(Name of the Limited Liability Company as it now appears on our records.)

y Company as it now appears on Limited Liability Company) ,	
ompany were filed on <u> </u>	$\frac{3}{3}$, $\frac{20}{21}$ and assigned
ted liability company here:	
ted Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
ESS)	
<u></u>	
	- <u>-</u> -
office address on our recor	rds, enter the name of the new registere
P. Pl. (J	
Enter Florida s	street address
	, Florida
t t	ted liability company here: ted Liability Company." the design ESS)

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 2471 SE, 20 AH 7: 03 Type of Action Title Name Address 4731 Hidden Forest Ln XAdd Ashley J. Bames Sarasota, FL 34235 DRemove Change □Add Remove __ Change ____ □Add □ Change □ Change □Add _____ Change ___ 🗆 Add

Remove

_____ Change

lf an	tending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Please add member maisti 20 All 7:03
	HMBK
	Ashley J. Barnes
	4731 Hidden Forest Ln
	Sarasota FL 34235
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
ffec	tive date, if other than the date of filing: $8(30/302)$ (optional)
an e	ffective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
	ment's effective date on the Department of State's records.
	ord 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
i is	filed.
	1 August 20 . 2021.
ate	Hugust 20. 2021. Offsey W. Barnes Signature of a member or authorized representative of a member
	Sefforey W. Barnes
	Signature of a member or authorized representative of a member
	To Man In Roses
	Jeffrey W. Barnes Typed or printed name of signee

Filing Fee: \$25.00