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| (Re                                     | questor's Name)   | <u></u>         |  |  |
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| PICK-UP                                 | ☐ WAIT            | MAIL            |  |  |
| (Bu                                     | siness Entity Nam | ne)             |  |  |
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Jordan Construction and Roofing, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Randy Jordan Name of Person Firm/Company 4450 SW 32nd Road #106 Address Gainesville Florida 32608 City/State and Zip Code rjordanacerr@outlook.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Randy Jordan Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Jordan Construction and Roofing, LLC   |  |                                   |
|--|--|-----------------------------------|
| (Name of the Limited Liability Compa<br>(A Florida Limited I   | ny as it now appears on our re<br>Liability Company) | cords.)                           |
| The Articles of Organization for this Limited Liability Company  | were filed on <u>6/21/2021</u>                       | and assigned                      |
| Florida document number L21000287709   |  |                                   |
| This amendment is submitted to amend the following:  |  |                                   |
| A. If amending name, enter the new name of the limited liab  | ility company here:                                  |                                   |
| The new name must be distinguishable and contain the words "Limited Liabil   | ity Company," the designation "                      | LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  |  | <del></del>                       |
| Principal office address MUST BE A STREET ADDRESS)   |  | 721<br>FAR <b>10 %</b>            |
|  | <del> </del>   | LLAN CI                           |
|  |  | S S                               |
| Enter new mailing address, if applicable:  |  |                                   |
| (Mailing address MAY BE A POST OFFICE BOX)   |  | S 3: 0                            |
|  |  |                                   |
| <ol> <li>If amending the registered agent and/or registered office a<br/>agent and/or the new registered office address here:</li> </ol> | nddress on our records, <u>en</u>                    | iter the name of the new regis    |
| Name of New Registered Agent:  |  |                                   |
| New Registered Office Address:   |  |                                   |
|  | Enter Florida street aa                              | ldress                            |
|  | Z):  | , Florida                         |
|  | City   | Zip Code                          |

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 amonding 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       |
|------------------|--------------|---------------------------|----------------------|
| MGR              | Chris Palmer | 4128 NW 59th Ave.         | <b>=</b> Add         |
|                  |              | Gainesville Florida 32653 | Remove               |
|                  |              |                           | □Change              |
| mgr Randy Jordan | Randy Jordan | 270 NE 160th Ave          |                      |
|                  |              | Williston Florida 32696   | Remove               |
|                  |              |                           | Change SECRETALLE    |
|                  |              |                           | ARY OF STATE  Change |
|                  |              |                           |                      |
|                  |              |                           | □Remove              |
|                  |              |                           | ☐ Change             |
|                  |              |                           | □ Add                |
|                  |              |                           | □Remove              |
|                  |              |                           | ☐ Change             |
|                  |              |                           | ∆dd                  |
|                  |              |                           | Remove               |
|                  |              |                           | □ Change             |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 10/01/2021 (optional) (If an effective 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. gnature of a member or authorized representative of a member RANDY JORDAN Typed or printed name of signee

Filing Fee: \$25.00