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A. BUTLER FEB 15 2022

# **COVER LETTER**

Division of Corporations
SUBJECT: Professional JR LLC Name of Limited Liability Company
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:
_
Evelin J Herrera Name of Person
PROFESSIONAL JR LLC Firm/Company
1080 24th Ave NE
Address
Naples Florida, 34120 City/State and Zip Code
·
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Evelin Herrera at (954) 294 1896
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certified Copy (additional copy is enclosed)

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.

PROFESSION	AL ) A LL  Ed Liability Company as i  A Florida Limited Liabilit	. C t now appears on our r y Company)	records.)	<u> </u>
The Articles of Organization for this Limited Li. Florida document number <u>L 21000310</u>		filed on 07/07	/2021	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability c	ompany here:		
The new name must be distinguishable and contain the we	ords "Limited Liability Con	npany," the designation	"LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applica	ble:	· · · · · · · · · · · · · · · · · · ·		<del>.</del>
(Principal office address MUST BE A STREE)	T ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	<u> </u>			
		*		
B. If amending the registered agent and/or reagent and/or the new registered office addres		ss on our records, <u>e</u>	enter the name	of the new registered
Name of New Registered Agent:	Evelin )	Herrela		
New Registered Office Address:	1080 24th	AVE NE Enter Florida street d	address	
	Naples	ity:	_, Florida <u> </u>	4120
	C	нy		rip Coae

## 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:

MGT = Manager AMBR = Authorized Member Address Title Name Type of Action MGR Evelin ) Heriera 1080 24th AVE NE, Naples FL, 34/20 VAdd \_\_\_\_\_ □Remove \_\_\_\_\_ □Change □Add □ Change \_\_\_\_\_ □Remove \_\_\_\_\_ Change □Remove \_\_\_\_\_ □Change □Add \_\_\_\_\_ □Remove □ Change \_\_\_\_\_ □Remove

tive date, if other than the date of filing: O7/03/202 (optional)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date ment's effective date on the Department of State's records.	<i>J</i> –
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Signature of a member or authorized representative of a member	

Division of Corporations.

I am writing to you by this means, to ask you that I need the identification number (EIN number) 87-1565523. appears on my company's site via sunbiz, since I made the request online but I did not receive or see any results, for this reason I am making this request by writing to you, very kindly ask you to help me because I do not know where to turn, without more to add for the moment I send you a cordial greeting thanking you for the attention given to this request letter and remaining at your disposal for any comments or questions.

Sincerely.

Evelin J Herrera

Gran Jam H

Date of this notice: 07-07-2021

Employer Identification Number:

87-1565523

Form: SS-4

Number of this notice: CP 575 G

PROFESSIONAL J R LLC EVELIN J HERRERA SOLE MBR 1080 24TH AVE NE NAPLES, FL 34120

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 87-1565523. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

### IMPORTANT REMINDERS:

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is PROF. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.



RECEIVED

2022 FEB 10 AM 8: 13

SECRETARY OF ST TALLAHASSEE.

# FLORIDA DEPARTMENT OF STATE Division of Corporations

January 22, 2022

EVELINE J HERRERA 1080 24TH AVE NE NAPLES, FL 34120

SUBJECT: PROFESSIONAL J R LLC

Ref. Number: L21000310494

We have received your document for PROFESSIONAL J R LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 522A00001729

Anissa Butler Regulatory Specialist II

www.sunbiz.org