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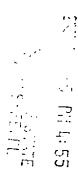
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.

Office Use Only



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COVER LETTER

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TO: Registration Division of C	i Section Corporations		. •
SUBJECT: <u>Je</u>	nting Longhaul T	ructing 1 5 patch Lited Liability Company	I.C.
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Vicki Jen	Name of Person	
	B'EYLAWA ar	H Pressure Washing S	Services LLC
	480 WAK411	G Arran Rd Address	
	Crawfo	Caville, Fl 38327 City/State and Zip Code	
	Victur35	2 yahoo. Com to be seed for future annual report noti	
	E-mail address: ()	to be ased for future annual report noti	fication)
For further informatio	n concerning this matter, please ea	all:	nj oi
Vicki	Jenkins	at (<u></u> 850) 2.5 Area Code Daytim	1-6551
Nam	ne of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for	or the following amount:		
□ \$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 Add Registratio		Street Address: Registration Secondinistion of Cor	
P.O. Box 6	327	The Centre of T	allahassee
Tallahassec	e, FL 32314	2415 N. Monroo	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jenkins Lombay Truck (Name of the Limited Liability Con (A Florida Limited)	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa	my were filed on July 15, 2021 and assigned
Florida document number <u>L 21000 323957</u> .	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	480 Wakulla Arran Rd
(Principal office address MUST BE A STREET ADDRESS)	Crawfordville, F1 32327
Enter new mailing address, if applicable:	480 Wakulla Aman Rd
(Mailing address MAY BE A POST OFFICE BOX)	Crawfordville, F1 32327
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:	Jenlans
New Registered Office Address: 480	Enter Florida street address To on
Craw	Florida 32327 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 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>	Name	Address	Type of Action
MGR	Ralph Jenkins	480 Wakulla Arran Rd	⊠Ádd
		480 Wakulla Arran Rd Crawfordville, F1 32327	□Remove
			□Change
			□Add
			□Remove
			□Change
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fective date, if other than	the date of filing:		(optional)	
an effective date is listed, the date ote: If the date inserted in this	must be specific and cann is block does not meet t	ot be prior to date of fil he applicable statuto	ing or more than 90 days	after filing.) Pu this date wil	irsuant to 605.020 I not be listed a
ocument's effective date on th	e Department of State's	s records.			
record specifies a delayed effer is filed.	ctive date, but not an ef	fective time, at 12:0	I a.m. on the earlier of	of: (b) The 9	Oth day after the
ated July 31, 2	.024	·			
) .	/				
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Vicki (Signature of a member	er or authorized represe	entative of a member		

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Filing Fee: \$25.00