

L21000375858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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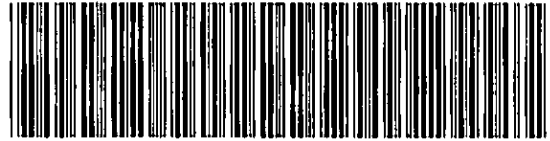
(Business Entity Name)

(Document Number)

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Amend

10/12/21--01034--035 **25.00

FILED
2021 OCT 12 PM 12:07
RECEIVED
CLERK OF SUPERIOR COURT
OF ARIZONA

OCT 21 2021

A RAMSEY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J BANFIELD & Co, LLC
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:

Jimmy Barker
Name of Person

J BANFIELD & Co, LLC
Firm/Company

1483 BRIDGEWAY
Address

FLEMING ISLAND FL 32003
City/State and Zip Code

JBARKER@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jimmy Barker at (904) 269 7090
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
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

FILED

J. BANFIELD & Co. LLC

2021 OCT 12 PM 12 07

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

TREASURY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 8-23-21 and assigned
Florida document number L 21000 375 858.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>RIAN PIETERS</u>	<u>3348 CANYON FALLS DR.</u>	<input type="checkbox"/> Add
		<u>GREEN COVE SPRINGS FL 32043</u>	
		<u>DIED 10/3/21</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Rich Alsop</u>	<u>1483 Bridgette Way</u>	<input checked="" type="checkbox"/> Add
		<u>Fleming Island FL 32003</u>	
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR.</u>	<u>Michelle Pieters</u>	<u>3348 Canyon Falls Dr.</u>	<input checked="" type="checkbox"/> Add
		<u>Green Cove Springs FL 32043</u>	
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

Signature of a member or authorized representative of a member

Jimmy C Barker
Typed or printed name of signee