K22000061467

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200382662822

03/18/22--01011--011 **60.00

22 KIS 15 1B 1: 38

T. MATTHEWS MAR 3 0 2022

COVER LETTER

	rprises North East LLC		
3000ECT	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christine Holloway		
		Name of Person	· -
	H & J Enterprises North E	ast LLC	
		Firm/Company	
	1045 NW 232nd Drive		
		Address	
	Newberry, Florida 32669		
		City/State and Zip Code	_
	HJenterprisesne@yahoo.com		
		to be used for future annual report notifica	ition)
For further information c	oncerning this matter, please c	all:	
Christine Holloway		352 284-1409 at ()	
Name o	f Person	Area Code Daytime To	elephone Number
Enclosed is a check for th	ne 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 Addres		Street Address:	
Registration S		Registration Section	on

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

22 HAR 18 PM 1: 38

H & J Enterprises North East LEC			
(Name of the Lim	ited Liability Comp (A Florida Limited	pany as it now appears on our r I Liability Company)	ecords.)
The Articles of Organization for this Limited I Florida document number L22000061467		y were filed on February 4th	and assigned
This amendment is submitted to amend the fol			
A. If amending name, enter the new name of	of the limited lia	bility company here:	
The new name must be distinguishable and contain the	words "Limited Lial	pility Company," the designation	"LLC" or the abbreviation "L,L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE.	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2579 SW 87th Drive Gainesville, Florida 3260	8
3. If amending the registered agent and/or gent and/or the new registered office addre	registered office ess here:	address on our records, e	nter the name of the new register
Name of New Registered Agent:	Christine Holl	oway	
New Registered Office Address:	1045 NW 232	nd Drive	
-		Enter Florida street a	uddress
	Newberry		, Florida ³²⁶⁶⁹
		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>	<u>Name</u>	Address	Type of Action
AMBR	Christine Holloway	1045 NW 232nd Drive	
		Newberry, Florida 32669	□Remove
			@ Change
AMBR Michael Hollowa	Michael Holloway	1045 NW 232nd Drive	
		Newberry, Florida 32669	□Remove
			D Change
AMBR	BR Jacqueline Jacobowitz	1908 SE Clatter Bridge Road	σ
		Ocala, Florida 34471	□Remove
			##Change
			□Add
		 	□Remove
			□Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove

			<u></u>		
		 -		_	
					
				 ,	
	_				
	<u> </u>				
					
		 -			
		_			
ective date, if other than th	e date of filing:	Mar	ch 10, Z	SZZ (optional	1)
effective date is listed, the date me te: If the date inserted in this b	st be specific and ca lock does not mee	innot be prior to dat	te of filing or more tha	ın 90 days after filin	g.) Pursuant to 605,020
ument's effective date on the I	epartment of Stat	e's records.	, , ,		
cord specifies a delayed effecti	va data hut nat an	affantius tima z	ot 17:01 o m. march.	condine of the 2	% . 004b .d
s filed.	e date, but not an	refrective time, a	u 12.01 a,m, on the	earner (i); (b) 1	ne 90in day after inc
Manuala 1 Lela		2022			
March Lim	•	eves.			
ed March 11th	, 				
ed	1				