## LZZ 000 206 425

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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## **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32314

Division of Corporations	•
SUBJECT: H8J Contractors 8 (	Lecining Service, "LLC"
The enclosed Articles of Amendment and fee(s) are sub-	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Jud	Name of Person
H8J Contract	ors & Chaning Service "LIC"
311 NW 42 nd	Address
<u>Decrfield</u> B	Secuch, FL 33064 City/State and Zip Code
Contractors 1	Cleaning 2022 @ amail. com (to be used for fundre annual report politication)
For further information concerning this matter, please c	all:
JUdith Mendoza Name of Person	at ( <u>954</u> ) <u>549 – 9302</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	✓ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee.  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	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

H&J Contactors & Cleans (Name of the Limited Liability Compa (A Florida Limited	any so it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on May 2, 2022	and assigned
florida document number <u>L22000206425</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	•
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:	202 NE 40th Street	
Principal office address MUST BE A STREET ADDRESS)	Cakland Park, FL 33	334
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> )		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of	the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Lip Code
	City 7	.ф с.оае

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	Manuel A. Ramirez	551 NW 46 Court	<b>%</b> ∧dd
Hernandez	Fort Lauderdale, FL 33309	□Remove	
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