## L22000327879

(Re	equestor's Name)	·
(Ad	ldress)	<del></del>
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
•	_	
Special Instructions to	Filing Officer:	
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Office Use Only



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Û8/24/22--01020--007 \***+**30.00

CLOND (12)



November 9, 2022

YESSIKA A. WELLS

5026 KNIGHTBRIDGE CIR. NORTH JACKSONVILLE, FL 32244

SUBJECT: J&J MODERN CABINET INSTALACION LLC

Ref. Number: L22000327879

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

The registered agent must sign accepting the designation.

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) 245-6052.

Letter Number: 222A00025177

Nadira D McClees-Sams EXECUTIVE ASSISTANT

www.sunbiz.org

## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations		
T3' +	1/ 000-		
SUBJECT: J > J	MOBORN CabiNET 1 Name of Lim	ited Liability Company	
-			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
•		•	
*		Name of Person	<del></del>
		Firm/Company	<del> </del>
		· ····································	
		Address	
	•		
	····	City/State and Zip/Code	
		,	
	E-mail address: (	to be used for future annual report noti	tication)
For further information co	oncerning this matter, please ca	all:	
,			
YESSIKA A	WELLS,	at ( 904 ) 405 Area Code Daytim	7674
Name o	Person	Area Code Daytim	e Felephone Number
Enclosed is a check for th	e following amount:		
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		(additional copy is enclosed)	(additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of T	
Tallahassee, I		2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limit	ed Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.)	<del></del>
	(A Florida Limited Liability Comp	any)	
The Articles of Organization for this Limited Li	iability Company were filed c	m 07/24/2023	and assigned
Florida document number <u>L 23,060 32</u>	7879	·	
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liability compa	ny here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company."	'the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
P. 4			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROVI		
Bruding address SIAT DE AT OST OFFICE.	<u></u>		
B. If amending the registered agent and/or r agent and/or the new registered office addres	•/	our records, <u>enter the nar</u>	ne of the new registere
agent and/or the new registered where admits			
Name of New Registered Agent:	YESSIKA A	WEZCS.	
New Registered Office Address:	YESSIKA A  5024 Knightsbru  End  JACKBONVILLE  City	lge Cir North	
	Ently .	r Florida street address	
	JACKBONVIILE	, Florida	Zin Code
New Registered Agent's Signature, if changing I			ing som

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

Title	<u>Name</u>	Address	Type of Action
MGR	JNAN R. GUERRA GRMAN	5026 Knightsbridge Cir. N	XAdd
•		JACKSONVILLE FL 32244	
٠			□Change
AMBR	YESSIKA A. Wells.	5024 Knightsbridge Cir. N	🗆 Add
		JACKSONVILLE, FL 32244	
			XChange
			□ Add
			DRemove
			□Change
			□Add
			□Remove
			□ Change
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una.	2 / DAKA_		<i>,</i> 43 )	- regus 7	ci agent		
Thon	k you.						
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effective date i te: If the date	f other than the s listed, the date must inserted in this ble tive date on the De	t be specific and ca ock does not mee	nnot be prior to d t the applicable	ate of filing or mo	(opti re than 90 days afte requirements, thi	onal) r filing.) Pursuant to 605.0 is date will not be listed	)20 d a
cord specifies s filed,	a delayed effective	e date, but not an	effective time,	at 12:01 a.m. o	n the earlier of: (b	5) The 90th day after	the
ed 12-5		Signature of a mer	2022				
	/ \X/	11 1	2 1/1	,			

EU: E 635.00