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COVER LETTER

Division of Cor			-	•
SUBJECT: J. B	SEAMLES Name of Lim	S GUTTER ited Liability Company	<u>S LLC</u>	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Nancy ho	Name of Person		
	J.B SEA	MCESS GUT	TERS LLG	2022 SE SF CRE
	275 W.B	axterst. Address	ST S	2022 SEP 19 PM 3: 50
		Springs, FL3		4 3: 50 1 3: 50
	<u>NG1213199</u> E-mail address: (12 D GM (1) C to be used for future annual report noti	<u>Om</u> fication)	
For further information co	oncerning this matter, please ca			
Mancy hame of	10 n2ale2	at (<u>386) 299-</u> Area Code Daytim	-7871 e Telephone Number	
Enclosed is a check for th	e following amount:			
EV\$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 Sta Certified Copy (additional copy is e	atus &

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



J. B. SEAMLESS GUTTERS LLC S. S. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)	n U
e Articles of Organization for this Limited Liability Company were filed on CN 25 2022 and assigned orida document number L 22 003 2 8559 is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: enew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" after new principal offices address, if applicable: rincipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Inter new mailing address, if applicable: Inter new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or t	he 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 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	
		а
	Ciţy	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 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 **Type of Action** Name **Address** 275 W. Baxter St. EAdd

De Leon Springs, FC32130 Remove Mgr. Narry Gonzaler ____ Change ______ □Change □∰emove □\$temove _____ □Change ____ □Remove _____ Change ____ __ □ Add _____ □ Remove _____ Change

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