

L22000476973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

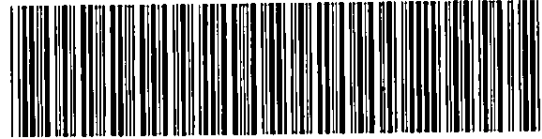
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



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2024 MAY -1 AM 7:40
STATE
FLORIDA

RECEIVED

RECEIVED
2024 MAY -1 PM 4:10
TALLAHASSEE, FLORIDA

SECRET
05/01/24

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$25.00

Authorization Signature: *J Cardona*
J Cardona General Home Services, LLC. L22000476973
BUSINESS (Name) Document #

- Walk in
- Mail out
- Photocopy
- Pick up time
- Will wait

Certified Copy of Articles of Organization
 Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other
- LLC
- CORP**

AMMENDMENTS

- X** Amendment
- Resignation of R.A. Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger
- Conversion

OTHER FILINGS

- Annual Report
- Fictitious Name
- APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

- Foreign Filing
- Limited Partnership
- Reinstatement
- Trademark
- Other

STATE OF FLORIDA
TALLAHASSEE, FL
JAN 11 7:40 AM '08

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J Cardona General Home Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and text(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jorge V Pu Cardona
Name of Person

J Cardona General Home Services, LLC
Firm Company

410 20th Ave NE
Address

Naples, FL 34120
City/State and Zip Code

car365jor@gmail.com
E-mail address (to be used for future annual report notification)

RECEIVED
TALLHASSEE, FL
MAY 11 AM 7:40
:D

For further information concerning this matter, please call:

Jorge V Pu Cardona 239 537-0988
Name of Person at (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 & Certified Copy (additional copy is enclosed)
- \$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**

J Cardona General Home Services, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/07/2022 and assigned Florida document number L22000476973.

This amendment is submitted to amend the following:

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

Cardona Carpentry Construction, LLC

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

DEPARTMENT OF STATE
 TALLAHASSEE, FL
 APR 7 4 0

D. If amending any other information, enter changes) here. (Attach additional sheets if necessary.)

NA

REC'D
AM 7:40
CLERK OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: _____ (optional)

If a different date is used, the date must be specified in the caption of the filing of the document. Orders after filing of a return to 000 0207 03/09

Note: If the date inserted in this box does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department's public website.

If the record reflects a delayed effective date, it will be effective only at 12:01 a.m. on the date of filing. The 90th day after the date is filed.

Dated May 1 2024

Signature of the member, authorized representative, or another

Jorge V. P. Cordona

(If the person is not a member)