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03/27/24--01005--022 **25.00



COVER LETTER

TO:

TO: Registration S Division of Co			
SUBJECT: Fire	ST RESPONSE Del Name of Lim	exat and Excavation So	ervice LLC
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Name of Person	
	-irst Res	ponc Bolocat and Example Firm/Company	ation service LLC
	1/400 422	Address	
		City/State and Zip Code 1999 Agrail.com to be used for future innual report notification)	
For further information	concerning this matter, please e	•	
Sorda Name	n Blumberg of Person	at (954) 743 - 9547 Area Code Daytime Telephone N	Sumber
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Section Division of Corporations	
P.O. Box 63 Tallahassee,	27	The Centre of Tallahassee 2415 N. Monroe Street, St	uite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	boat and Estauntion service we
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Comp	apany were filed on $OV/(3/23)$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited JBMR Contracting LLC	Liability Company," the designation "LLC" or the abbreviation "ELC."
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "[SL.C."
Enter new principal offices address, if applicable:	Samo
(Principal office address MUST BE A STREET ADDRES.	is)
	Samc = ==================================
Enter new mailing address, if applicable:	34(*)
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	~e
New Registered Office Address:	Enter Florida street address
	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>	Address	Type of Action
			□∧dd
			Remove
		 	□Change
			□Add
			□ Remove
			☐ Change
			□Add
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			Change
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			□Remove
			□Change
			□Add
			□Remove
			□Change

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_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an eff <u>Note:</u>	ve date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	
	1. /
	Signature of a member or authorized representative of a member
	Jordan Blumberg