

L230003341228

(Requestor's Name)

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(City/State/Zip/Phone #)

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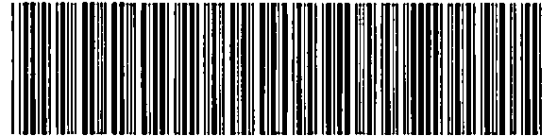
(Business Entity Name)

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07/20/23

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**DATE: 7/20/2023**

**NAME: JCM CARMONA'S CONSTRUCTION & SERVICES, LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

JCM CARMONA'S CONSTRUCTION & SERVICES, LLC.

SUBJECT: \_\_\_\_\_  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JUAN CARMONA

\_\_\_\_\_  
Name of Person  
JCM CARMONA'S CONSTRUCTION & SERVICES, LLC.

\_\_\_\_\_  
Firm/Company  
5406 46TH AVE N.

\_\_\_\_\_  
Address  
SAINT PETERSBURG, FL 33709

\_\_\_\_\_  
City/State and Zip Code  
CARMONAS.CONSTRUCTION23@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CESAR CARMONA 731 4129668  
\_\_\_\_\_  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
JUN 20 PM 3:19  
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TALLAHASSEE, FL

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

JCM CARMONA'S CONSTRUCTION & 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 07 / 14 / 2023 and assigned  
Florida document number L23000334028.

This amendment is submitted to amend the following:

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

JCM CARMONA'S CONSTRUCTION & SERVICES, LLC.

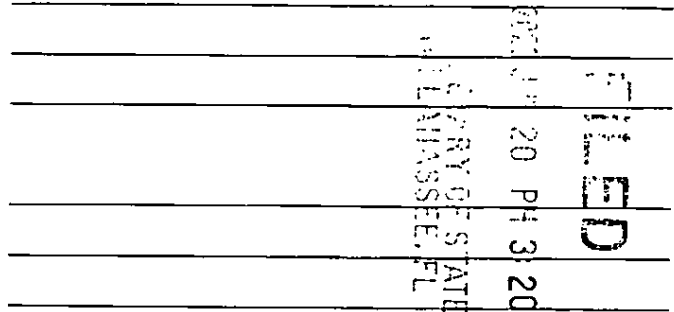
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(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 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:

New Registered Office 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>	<u>Address</u>	<u>Type of Action</u>
MGR	JUAN CARMONA	5406 46TH AVE N. SAINT PETERSBURG FL 33709	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		TITLE	<input checked="" type="checkbox"/> Change
MGR	CESAR CARMONA	5406 46TH AVE N. SAINT PETERSBURG FL 33709	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		TITLE	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY 19 2023

Signature of a member or authorized representative of a member

CESAR CARMONA

Typed or printed name of signee