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2024 SEP 13 PM 2:43
STATE
MILWAUKEE, WI

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SJ swift Construction LLC
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:

Sergio Izzo
Name of Person

SJ swift Construction LLC
Firm/Company

8926 Joseph CT
Address

Jacksonville, FL 32216
City/State and Zip Code

SergioIzzo1104@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sergio Izzo at (904) 349-6734
Name of Person 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**

ST Swift Construction 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 Sept 05, 2024 and assigned Florida document number L24000388272.

This amendment is submitted to amend the following:

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

ST Swift Painting and 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:

(Principal office address MUST BE A STREET ADDRESS)

8926 Joseph CT, Jacksonville, FL
32216

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8926 Joseph CT, Jacksonville, FL
32216

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:

Sergio 1220

New Registered Office Address:

8926 Joseph CT, ~~0000~~

Enter Florida street address

Jacksonville

Florida

City

Zip Code

SEP 13 PM 2:43
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
JACKSONVILLE

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> |
|--------------|------------------------------|---|--|
| <u>MGR</u> | <u>Sergio Izzo</u> | <u>8926 Joseph CT, Jacksonville, FL</u> | <input checked="" type="checkbox"/> Add |
| | | <u>32216</u> | <input type="checkbox"/> Remove |
| | | <u></u> | <input type="checkbox"/> Change |
| <u>MGR</u> | <u>Werddy Varela-Salazar</u> | <u>8926 Joseph CT, Jacksonville,</u> | <input checked="" type="checkbox"/> Add |
| | | <u>FL 32216</u> | <input type="checkbox"/> Remove |
| | | <u></u> | <input type="checkbox"/> Change |
| <u>MGR</u> | <u>Ashley Izzo</u> | <u>8926 Joseph CT, Jacksonville,</u> | <input type="checkbox"/> Add |
| | | <u>FL 32216</u> | <input checked="" type="checkbox"/> Remove |
| | | <u></u> | <input type="checkbox"/> Change |
| <u></u> | <u></u> | <u></u> | <input type="checkbox"/> Add |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: Sept, 05, 2024 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6(5.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated

09/11/24

Signature of a member of author

Signature of a member or authorized representative of a member

Sergio 1220

Typed or printed name of signee