M21000009803

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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4/1/2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ramos Consulting, LLC	
Name of Forei	gn Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Stacee Martinka	
Name of Person	
LJA Engineering, Inc.	
Firm/Company	
3600 W Sam Houston Pkwy S, Suite 600	
Address	
Houston, TX 77042	
City/State and Zip Cod	le
smartinka@lja.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter	, please call:
Stacee Martinka	_at ()
Name of Person	Area Code & Daytime Telephone Number
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
Enclosed is a check for the following □\$25 Filing Fee □ \$30 Filing Fee & Certificate of Status CR2E055 (9/15)	amount: ☐ \$55 Filing Fee & ☐ \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

RECEIVED

2022 MAR 31 AH 7:54

SECRET WAY OF STATE TALEAHASSEE, FL

March 18, 2022

STACEE MARTINKA 3600 W SAM HOUSTON PARKWAY S SUITE 600 HOUSTON, TX 77042

SUBJECT: RAMOS CONSULTING, LLC

Ref. Number: M21000009803

We have received your document for RAMOS CONSULTING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 322A00006457

www.sunbiz.org

District of Control of the DO DOY cooff Mill 1 DO DO

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA BUSINESS IN FLORIDA The must be completed)

1. Name of limited liability Company as it appear	s on the records of the Flo	orida Department of	183EE. F.
State: Ramos Consulting, LLC			
Enter new principal office address, if applicable:			
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited lia	ability company is: M2100	0009803	
3. Jurisdiction of its organization: Texas			
4. Date authorized to do business in Florida: $\frac{07/29}{1}$			
SECTION II (5-9 complete only the applicable	changes)		
5. New name of the limited liability company: LJ	A Program Management, I	.I.C	
(mus	t contain "Limited Liabilit	y Company, " "L.L.C.,"	or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or marmust contain "Limited Liability Company," "L.L.C	naging members adopting	eting business in Florida the alternate name. The	and attach a alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our ro ddress here:	ecords, <u>enter the name c</u>	of the new
Name of New Registered Agent:	<u></u>		
New Registered Office Address:			
	Enter F	Florida Street Address	
	City	Florida	iv Code
No De la	•	221	p coue
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ager the provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of th	nt and agree to act in this i and complete performance ered agent as provided for in the registered office add	e of my duties, and I and in Chapter 605, F.S. C	r familiar with Fr. if this

If Changing Registered Agent, Signature of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action		
<u>Treasure</u> r	Thomas Lowe	2700 La Frontera Blvd. Suite 150	🖾 Add		
		Round Rock, TX 78681	∑ Remo		
Treasurer	Jeff P. Collins	Remove - Retired	□Add		
		□Remo			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
			□Remo		
<u>_</u>			□Add		
			□Remo		
			□Add		
aforemention	nder the law of which this entity	ated by the official having custody of records in a	□Removihe		

Filing Fee: \$25.00



CERTIFICATE OF FILING

LJA Program Management, LLC 801544740

[formerly: Ramos Consulting, LLC]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 01/31/2022

Phone: (512) 463-5555

Effective: 01/31/2022



John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 Prepared by: Bernadette DeJoya TID: 10303

Dial: 7-1-1 for Relay Services Document: 1116351330002