2019PJ0000P19

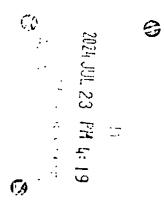
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(8u:	siness Entity Nar	me)
(34)	emicoo Emily inter	,
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Certified Copies	_ Certificates	s of Status
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Special Instructions to f	Filing Officer:	

Office Use Only



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07/23/24--01005--013 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	AATION: James Frazier Con	struction Inc	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	James Frazier		
		Name of Contact Persor)
	James Frazier Construction I	nc	
		Firm/ Company	
	130 Tamarind Court		
		Address	***************************************
	Kingsland Georgia 31548		
		City/ State and Zip Code	2
	jfccustombuild@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
James Frazier		at (<u>904</u>	509-9777
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

James Frazier Construction Inc

(Name of Corporation as cur	rently filed with the Flori	ida Dept. of State)		
P 14000064966				
(Document Num	ber of Corporation (if know	vn)		
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corpor	ration adopts the fol	lowing ame	endment(s) t
A. If amending name, enter the new name of the corporatio	<u>n:</u>			
JFC Custom Builders Inc			The	new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc." or "Co "chartered," "professional association," or the abbreviation "I	". A professional corpo			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA			
				_
C. Enten new molling address: if anyticable.		2 -	2024	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· •	<u> </u>	
	NA	· · · · · · · · · · · · · · · · · · ·	. 23	•
			- 7	
D. If amending the registered agent and/or registered office	address in Florida enter	the name of the	.; 5	
new registered agent and/or the new registered office ado			- 19	
Name of New Registered Agent		Œ <u>Ø</u>		
NA				
(Floric	da street address)			
New Registered Office Address:		, Florida		
	(City)	· -	(Zip Code)	
New Registered Agent's Signature, if changing Registered A	gent:			
l hereby accept the appointment as registered agent. I am fami		bligations of the pos	tion.	
Signature of N	ew Registered Agent, if ch	anging		
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Jo</u>	<u>hn Doe</u>	
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ully Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			NA
Add			
Remove			
2)Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The second of th	icles, enter change(s) here: (Be specific)
A	
	isnor, reclassification, or cancellation of issued shares
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 day	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by 100 %	
(voting group)	
July 18, 2024 Dated	_
Signature By a director, president or other officer –	if directors or officers have not have
selected, by an incorporator – if in the har	ids of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
James Frazier	
(Typed or printed name	of person signing)
President	

(Title of person signing)

Date of this notice: 07-18-2024

Employer Identification Number:

99-4035140

Form: SS-4

Number of this notice: CP 575 A

JFC CUSTOM BUILDERS INC 7901 4TH ST N ST PETERSBURG, FL 33702

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 99-4035140. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 1120

04/15/2025

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification (corporation, partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S, U.S. Income Tax Return for an S Corporation, must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, Election by a Small Business Corporation.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, Electronic Choices to Pay All Your Federal Taxes. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents or other payroll service providers, are available to assist you. Visit www.irs.gov/mefbusproviders for a list of companies that offer IRS e-file for business products and services.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is JFCC. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.