

A31674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

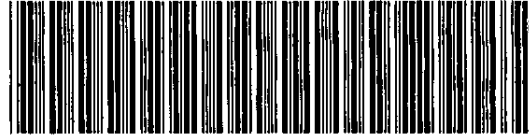
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

APR 12 2016
J. BRUCI



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2016

MICHELLE M. ADKINS
P.O. BOX 17072
TAMPA, FL 33682

SUBJECT: JOHN-MARY ENTERPRISES, LTD.
Ref. Number: A31674

We have received your document for JOHN-MARY ENTERPRISES, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please indicate your changes on the 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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 216A00006970

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2016

MICHELLE M. ADKINS
P.O. BOX 17072
TAMPA, FL 33682

SUBJECT: JOHN-MARY ENTERPRISES, LTD.
Ref. Number: A31674

We have received your document for JOHN-MARY ENTERPRISES, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 816A00005603

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: John-Mary Enterprises Ltd.

Name of Limited Partnership or Limited Liability Limited Partnership

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Michelle M. Adkins

Contact Person

John-Mary Enterprises

Firm/Company

P.O. Box 17072

Address

Tampa, FL 33682

City, State and Zip Code

buschjunc@aol.com

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

For further information concerning this matter, please call:

Michelle Adkins

Name of Contact Person

at (813) 508-6088

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

John-Mary Enterprises Ltd
Insert name currently on file with Florida Department of State
A 31674
Florida Document Number of Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.

FIRST: The reason for filing this statement of correction is:

- ☐ The record contained false or erroneous information.
☐ The record was defectively signed.

SECOND: This statement corrects _____
Specify document type being corrected
filed with the Florida Department of State on _____
Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows:

Please add - Michelle M. Adkins as
general partner to
John-Mary Enterprises Ltd.
P.O. Box 17072 Tampa, FL 33682

FOURTH: The false or erroneous information or defect is corrected as follows:

Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

Mary Josephine Castro

Signature(s) of new general partner(s), if any:

Mary Josephine Castro

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation below)

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.

Mary Josephine Castro
Signature of Registered Agent

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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