## L0100005567

| (Re                                     | equestor's Name)   |           |  |  |
|---|--------------------|-----------|--|--|
| (Address)                               |                    |           |  |  |
| (Address)                               |                    |           |  |  |
| (Cit                                    | ty/State/Zip/Phone | · #)      |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL      |  |  |
| ,<br>(Business Entity Name)             |                    |           |  |  |
| (Document Number)                       |                    |           |  |  |
| Certified Copies Certificates of Status |                    | of Status |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |
|   |                    |           |  |  |
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## **COVER LETTER**

| TO: Registration Se<br>Division of Co  |   |                                  |   |  |
|--|---|----------------------------------|---|--|
| MJB Enterprises 1, LLC   |   |                                  |   |  |
|  | N                                       | ame of Limited Liabil            | ity Company   |  |
| Dear Sir or Madam:   |   |                                  |   |  |
| The enclosed Statement   | of Correction and fee(s) ar             | e submitted for filing.          |   |  |
| Please return all corresp  | ondence concerning this m               | atter to the following:          |   |  |
| Michael J.   | Breen                                   |                                  |   |  |
|  | Name of Person                          |                                  |   |  |
| MJB Enter  | prises 1, LLC                           |                                  |   |  |
|  | Firm/Company                            |                                  |   |  |
| 1214 First   | Avenue Nort                             | th                               |   |  |
|  | Address                                 |                                  |   |  |
| Jacksonvill  | e Beach, FL                             | 32250                            |   |  |
| C  | ity/State and Zip Code                  |                                  |   |  |
| ·  | be used for future annual               | ,                                |   |  |
| For further information concerning this matter, please call:   |   |                                  |   |  |
| Michael Br   |   | at ( <u>904</u> )                | 247-8448  |  |
| Name   | of Person                               | Area Code                        | Daytime Telephone Number  |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 |   | E<br>C<br>F                      | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314 |  |
| Enclosed is a check for  | the following amount:                   |                                  |   |  |
| \$25 Filing Fee  | \$30 Filing Fee & Certificate of Status | \$55 Filing Fee & Certified Copy | \$60 Filing Fee, Certificate of Status & Certified Copy   |  |
| CR2E062 (9/15)   |   |                                  |   |  |

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: MJB Enterprises 1, LLC SECOND: The Florida Document number of the limited liability company is: \_\_\_\_ Document to be corrected is: Resignation/Dissociation of Member/Manager THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT K Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Correct DATE The filing date of the Resignation/Dissociation of Deborah B Fitzgerald, a Member/Manager for MJB Enterprises 1, LLC, a Florida Limited Liability Company was filed on December 20, 2016 in accordance with the tax return calendar year ending December 31, 2016. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2E062 (9/15)



November 30, 2016

MICHAEL J BREEN 1214 FIRST AVENUE NORTH JACKSONVILLE BEACH, FL 32250

Re: Document Number: L07000005567

The Resignation/Dissociation of DEBORAH B FITZGERALD, a Member/Manager for MJB ENTERPRISES 1, LLC, a Florida Limited Liability Company was filed on November 28, 2016.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Filing Section.

Letter Number: 616A00025513

Yasemin Y Sulker Regulatory Specialist II Division of Corporations

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