

L070000033920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

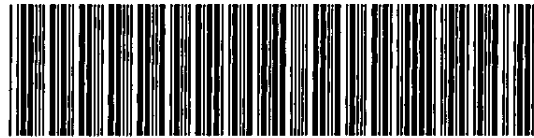
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JSSLW ENTERPRISES, 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:

JOHN WILLIAMS
(Name of Person)

JSSLW ENTERPRISES LLC
(Firm/Company)

4107 NW 75th AVE
(Address)

CORAL SPRINGS FL 33065
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JOHN WILLIAMS at (954) 461-5697
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

JSSLW Enterprises, LLC

(Present Name)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FIRST: The Articles of Organization were filed on 3-29-07 and assigned document number WO7000015334.

SECOND: This amendment is submitted to amend the following:

My bank, after trying to open a business account
informed me there was a problem. In the manage-
ment block my name (John Williams) needs to
be there instead of my wife's. if I need to
write a check to the business, I need to have
my name in that block. please make the
necessary adjustment. your help in this matter
will be greatly appreciated and needed.
Thanks.

Dated 4-2, 2007.

John Williams

Signature of a member or authorized representative of a member

JOHN WILLIAMS

Typed or printed name of signee

Filing Fee: \$25.00