

LD9000067517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

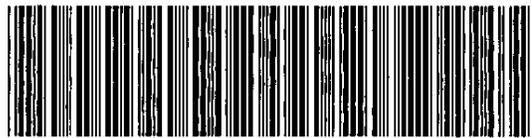
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 SEP 18 PM 12: 23

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JYE-BEAR, 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:

Ann Marie Jones

Name of Person

Jye-Bear, LLC

Firm/Company

210 Hedgecock Ct.

Address

Satellite Beach, Fl. 32937

City/State and Zip Code

reraru@hotmail.com

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

For further information concerning this matter, please call:

Ann Marie Jones

Name of Person

at (**321**)

777-9039
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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	DANIEL JONES	210 HEDGECOCK CT SATELLITE BEACH FL 32937	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	TYLER JONES	210 HEDGECOCK CT SATELLITE BEACH FL 32937	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated SEPTMBER 15 , 2009



Signature of a member or authorized representative of a member
ANN MARIE JONES
Typed or printed name of signee