

✓
L09000110454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

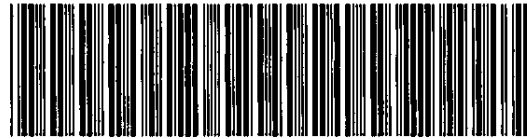
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN 10 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KATJEN, 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:

SHAYNE CAHILL

Name of Person

S.N.K., BUSINESS INVESTMENTS, LLC

Firm/Company

4212 COMMERCIAL WAY

Address

SPRING HILL, FL, 34606

City/State and Zip Code

SHAYNE@CAHILLFIT.COM

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

For further information concerning this matter, please call:

SHAYNE CAHILL

Name of Person

at (352) 5841192

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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KATJEN, LLC

Page 1 of 3

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>
MRGM	S.N.K. BUSINESS INVESTMENTS, LLC	4212 COMMERCIAL WAY, SPRING HILL, FL, 34606, US	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGRM	SUSAN ALASCIA	1320 COMMERCIAL WAY, SPRING HILL, FL, 34606	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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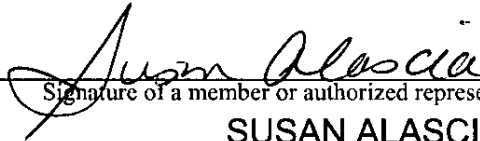
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TALLAHASSEE, FLORIDA

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Add
Remove

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

Dated _____.



Signature of a member or authorized representative of a member

SUSAN ALASCIA

Typed or printed name of signee

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Filing Fee: \$25.00

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