

L11000005864 ✓

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

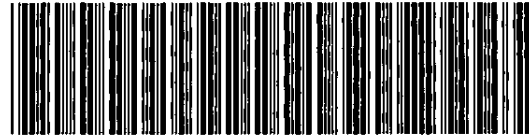
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

B. BOSTICK

MAY - 3 2012

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JMM FRAMING, INC  
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:

Helen A. JONES  
Name of Person

Rock Springs Tax & ACCOUNTING, INC  
Firm/Company

13 E. TANGLOWOOD DR  
Address

APOPKA, FL 32712  
City/State and Zip Code

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

For further information concerning this matter, please call:

Helen JONES at (407) 880-4200  
Name of Person Area Code & Daytime Telephone Number

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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)

*Check  
already  
paid*

**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

| Title | Name         | Address                                                | Type of Action                                                             |
|-------|--------------|--------------------------------------------------------|----------------------------------------------------------------------------|
| MGRM  | DANIEL MYATT | 856 ORIENTA AVE APT 6<br>ALTAMUNTA SPRING<br>FL. 32701 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|       |              |                                                        | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|       |              |                                                        | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|       |              |                                                        | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
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|       |              |                                                        | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

NA

Dated APRIL 24, 2012

Jonathan Myatt  
Signature of a member or authorized representative of a member  
JONATHAN MYATT  
Typed or printed name of signee

STATE OF FLORIDA  
12 MAY -2 PM 4:09



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2012

HELEN P. JONES  
13 S. TANGLEWOOD DRIVE  
APOPKA, FL 32712

SUBJECT: JMM FRAMING, LLC.  
Ref. Number: L11000005864

We have received your document for JMM FRAMING, LLC. and your check(s) totaling \$35.00. 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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 412A00012003