

L110000067914

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

MAY 25 2016

SWARDEN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jacobs Cable Services 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:

Gerald Jacobs
Name of Person
Jacobs Cable Services LLC
Firm/Company
PO Box 2724
Address
Orange Park, FL 32067
City/State and Zip Code
jacobscable@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gerald Jacobs at 352 207-9993
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

JACOBS CABLE SERVICES LLC

The Articles of Organization for this Limited Liability Company were filed on 06/10/2011 and assigned
Florida document number L11000067914

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, ³⁰¹enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

Page 2 of 3

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May, 18. 2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Gerald Jacobs
Typed or printed name of sign

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2016 MAY 23 P 3:34
CLERK OF STATE
JAN. ALAN SEXTON
FLORIDA