

L11000078029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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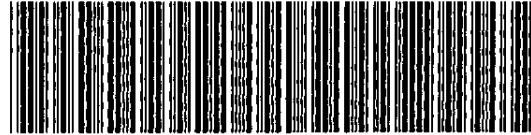
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 16 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Islette & Jones 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:

Stephanie I. Jones
Name of Person

Find Book Tour
Firm/Company

23150 Fashion Drive Suite 232-A
Address

Estero, FL 33928
City/State and Zip Code

admin@findbooktour.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Jones at 139-240-4933
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

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TALLAHASSEE, FLORIDA

Tollette & Jones LLC

The Articles of Organization for this Limited Liability Company were filed on 01/06/2011 and assigned Florida document number L17000078029.

NA

NA

NA

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TALLAHASSEE, FLORIDA

NA

NA

_____, **Florida** _____
City *Zip Code*

NA

Page 1 of 2

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

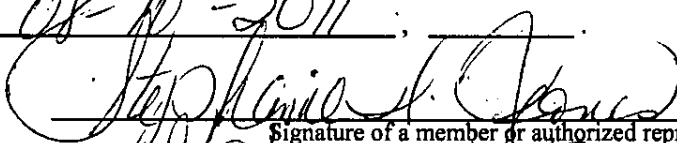
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Tamisha McJones	6362 Pyrite Pl Alta Loma, CA 91737	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)

NA

Dated

08-10-2011



Signature of a member or authorized representative of a member

Stephanie L. Jones

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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