

L14 000098233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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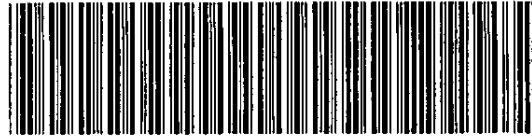
(Business Entity Name)

(Document Number)

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AUG 12 2016  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Jae S Products & 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:

Jasmine Williams  
Name of Person

Jae S Products & Services  
Firm/Company

196 Lee Miller Rd  
Address

Crawfordville, FL 32327  
City/State and Zip Code

Jasmine Products Services @ outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jasmine Williams at (407) 949-1220  
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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Jae S Products & Services LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/18/14 and assigned  
Florida document number 44000098233.

This amendment is submitted to amend the following:

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

Jasmine Williams LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

Enter new principal offices address, if applicable: N/A

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable: N/A

**(Mailing address MAY BE A POST OFFICE BOX)**

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

Name of New Registered Agent: N/A

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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

APPROVAL  
AND  
FILED

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

I am simply amending the registered name of my LLC from  
Jae S Products and Services to  
Jasmine Williams LLC.

I would like to make this change to the registered name  
while mainting the registered fictitious name,  
Jasmine Products & Professional Services, filed 2/11/16  
(registration number G16000015567) to accompany the  
registered name change (of Jasmine Williams LLC).

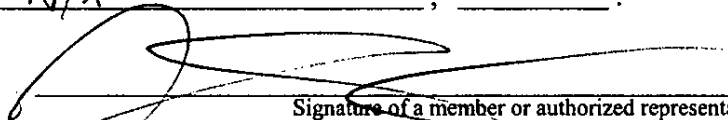
**E. Effective date, if other than the date of filing: 8/11/16 (optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 8/11, \_\_\_\_\_.



Signature of a member or authorized representative of a member

Jasmine Williams

Typed or printed name of signee

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DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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