

L14000100674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2014 SEP 24 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gulligan SEP 30 2014



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2014

HUNG T. MAI
14031 N. DALE MABRY HWY
TAMPA, FL 33618

SUBJECT: THE JONO PLAZA I LLC
Ref. Number: L14000100674

We have received your document for THE JONO PLAZA I LLC and your check(s) totaling \$52.50. 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.

Neyssa Culligan
Regulatory Specialist II

Letter Number: 814A00019572

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE JONO PLAZA I 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:

HUNG T. MAI
Name of Person

THE JONO PLAZA I LLC
Firm/Company

14031 N. DALE MABRY HIGHWAY
Address

TAMPA, FL 33618
City/State and Zip Code

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

For further information concerning this matter, please call:

HUNG T. MAI at (813) 962-6230
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**

FILED

2014 SEP 24 AM 10:16

THE JONO PLAZA I LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 06/24/14 and assigned Florida document number L14000100674.

This amendment is submitted to amend the following:

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

N/A

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

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, 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TU K. MAI	14031 N. DALE MABRY HWY	☒ Add
		TAMPA, FL 33618	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
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			☐ Add
			☐ Remove

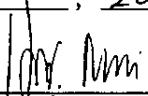
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated SEPTEMBER 20, 2014.



Signature of a member or authorized representative of a member

HUNG T. MAI MGR

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA