

L1400019376A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

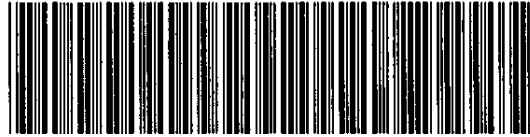
(Business Entity Name)

(Document Number)

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2015 FEB 26 PM 12:11
SOUTH FLORIDA
TALLAHASSEE, FLORIDA

N. Gulligen FEB 26 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K. B. JONES Enterprise, 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:

Keith B. JONES

Name of Person

K.B. JONES Enterprise, LLC.

Firm/Company

4200 Community Dr. Apt. 1907

Address

West Palm Beach, FL 33409

City/State and Zip Code

Kbjel66@yahoo.com

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

For further information concerning this matter, please call:

Keith B. JONES

Name of Person

at (561) 719-2721

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2015

KEITH B JONES
4200 COMMUNITY DRIVE
APT. 1907
WEST PALM BEACH, FL 33409

SUBJECT: K.B. JONES ENTERPRISES, LLC.
Ref. Number: L14000193769

We have received your document for K.B. JONES ENTERPRISES, LLC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 215A00002521

RECEIVED
15 FEB 26 11:10:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2015 FEB 24 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K.B. Jones Enterprise, 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 Dec. 1, 2014 and assigned
Florida document number L14000193769.

This amendment is submitted to amend the following:

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

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)

4200 Community DR. Apt. 1907
West Palm Beach, FL 33409

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 223250
West Palm Beach, FL 33422

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:

Rhonda Brinkley-Jones

New Registered Office Address:

4200 Community DR. Apt. 1907

Enter Florida street address

West Palm Beach, Florida 33409

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.

[Signature]
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	Keith B. Jones	4200 Community Dr.	<input checked="" type="checkbox"/> Add
		Apt. 1907 West Palm Bch, FL 33409	<input type="checkbox"/> Remove
		REH-	
Ambr	Keith B. Jones		<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGR	Rhonda Brinkley-Jones	4200 Community Dr. Apt 1907	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33409	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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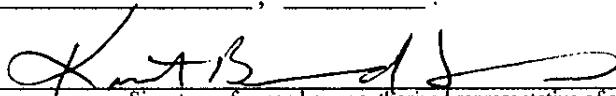
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Doing Business in Transportation / Wholesale

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 _____,



Signature of a member or authorized representative of a member

Keith B. Jones

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2015 FEB 24 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA