

L14000194532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

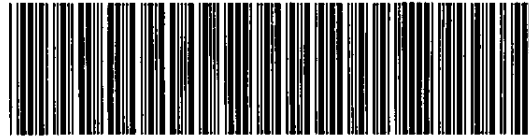
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/27/15--01012--017 **30.00

02/23/15--01023--014 **25.00

FILED
15 MAR 25 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~03/27/15~~ MAR 27 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JMC FREIGHT, 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:

OGNJEN CAPIN
Name of Person

JMC FREIGHT, LLC
Firm/Company

410 EVERNIA STREET
Address

WEST PALM BEACH, FL 33401
City/State and Zip Code

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

For further information concerning this matter, please call:

OGNJEN CAPIN at (305) 494-5893
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2015

OGNJEN CAPIN
410 EVERNIA STREET
WEST PALM BEACH, FL 33401

SUBJECT: JMC FREIGHT, LLC
Ref. Number: L14000194532

We have received your document for JMC FREIGHT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 415A00004457

RECEIVED
15 MAR 25 AM 10:00
DIVISION OF CORPORATIONS
INFORMATION SERVICES

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

JMC FREIGHT, 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 12/23/2014 and assigned Florida document number L14000194532.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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: _____

New Registered Office Address: _____

Enter Florida street address

City

Florida

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

MGR	MONIKA VEIC	113 MINNIEHAWK CIRCLE, HAINES CITY	<input type="checkbox"/> Add
		33844 FL	<input checked="" type="checkbox"/> Remove

AMDR MONIKA MEIC 113 MINNIEHAMA CIRCLE, HAINES CITY ☒ Add
33844 FL ☐ Remove

15 MAR 25 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE
FEDERAL
BUREAU OF
INVESTIGATION
U. S. DEPARTMENT OF JUSTICE

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

Hello, My name is OGNJEN CAPIN my title is MGR in company JMC Freight
I want to change my MGR title to AMBR - because of
the new FL Law I'm not able to open bank account under my
company name with old title. PLEASE GET my title changed
from MGR to AMBR so that my company can operate. I appreciate business
with you.

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 March 20th, 2015

Signature of a member or authorized representative of a member

OGNJEN CAPIN
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA