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(Business Entity Name)

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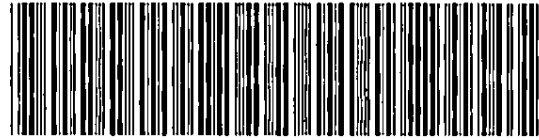
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DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jones Group of N. Florida 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:

Ferron C. Jones
Name of Person

Jones Group of N. Florida
Firm/Company

603 Fulton Rd E-49
Address

Tallahassee, FL 32312
City/State and Zip Code

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

For further information concerning this matter, please call:

Ferron C. Jones at (850) 570-3543
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$50.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

23. ... 12

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

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Type of Action

☐ Change

[illegible]

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.

Dated Jan 3 2024 : _____

Ferra C. Jones
Typed or printed name of signer

Filing Fee: \$25.00