

L160000 30458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

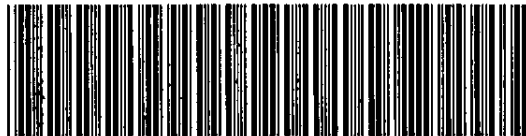
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/09/16 -01016-001 **30.00

FILED
16 MAY 23 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 27 2016
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mojica 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:

Juan Mojica
Name of Person

Mojica Enterprise LLC
Firm/Company

2531 Summer Glen Dr
Address

Orlando FL 32818
City/State and Zip Code

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

For further information concerning this matter, please call:

Juan Mojica at (407) 267-2080
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

May 11, 2016

JUAN MOJICA
2531 SUMMER GLEN DR
ORLANDO, FL 32818

SUBJECT: MOJICA ENTERPRISE LLC
Ref. Number: L16000030458

RECEIVED
2016 MAY 23 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MOJICA ENTERPRISE 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 516A00009965

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16 MAY 23 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mojica Enterprise LLC

16 MAY 68 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
NEW Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

Lined area for document content.

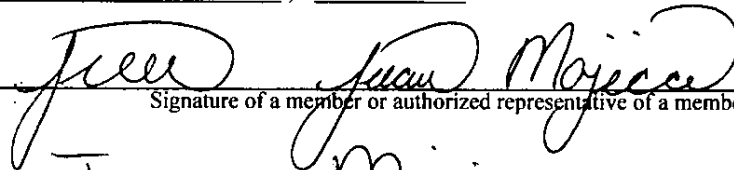
E. Effective date, if other than the date of filing: _____ (optional)

(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 5/19, 2016.



Signature of a member or authorized representative of a member
Juan Mojica

Typed or printed name of signee

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16 MAY 23 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA