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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

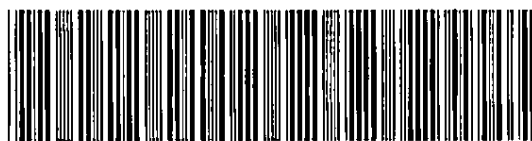
(Business Entity Name)

(Document Number)

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

S. WARREN

DEC 11 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ashland Johnson Enterprises 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:

Michele E. Campbell

Name of Person

Ashland Johnson Enterprises LLC

Firm/Company

3622 Craigsher Dr

Address

Apopka FL 32712

City/State and Zip Code

rmccampbell1029@aol.com

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

For further information concerning this matter, please call:

Michele E. Campbell

407 495-7588

at ()

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

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TALLAHASSEE
FLORIDA
Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
AMBR	Ronald W. Campbell	25546 SR 46	<input type="checkbox"/> Add
		Sorrento, FL 32776	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Michele E. Campbell	3622 Craigsher Dr	<input type="checkbox"/> Add
		Apopka, FL 32712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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JANUARY 17 2017

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

[illegible]

E. Effective date, if other than the date of filing: 1 October 2017 (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 28 November 2017

Signature of a member or authorized representative of a member

Michele E. Campbell

Typed or printed name of signee

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NEW YORK STATE
FBI LABORATORY