

L16000077866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

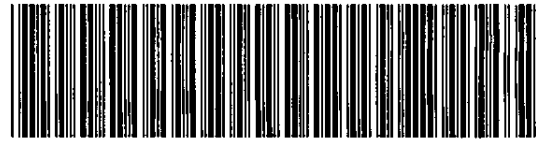
(Business Entity Name)

(Document Number)

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FILED  
16 DEC 16 PM 3:40  
TALLAHASSEE, FLORIDA

DEC 16 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 6, 2016

JOHN C SPADARO  
15640 SW 16TH CT  
PEMBROKE PINES, FL 33027

SUBJECT: J.K.G.K. LLC  
Ref. Number: L16000077866

We have received your document for J.K.G.K. LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 416A00025928

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J.K.G.K. 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:

John C. Spadaro  
Name of Person

J.K.G.K. LLC  
Firm/Company

15640 SW 16th ct  
Address

Pembroke Pines, FL 33027  
City/State and Zip Code

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

For further information concerning this matter, please call:

John Spadaro at (954) 880-7104  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

J.K.G.K., 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 April 21, 2016 and assigned Florida document number L16000077866.

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 contain 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)

15640 SW 16th ct  
Pembroke Pines, FL 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15640 SW 16th ct  
Pembroke Pines, FL 33027

**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:

John C. Spadaro

New Registered Office Address:

15640 SW 16th ct

Enter Florida street address

Pembroke Pines

Florida

City

33027

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**

~~MOZ~~ John C Spadaro 15640 SW 16 - Ct  
Pembroke Pines, FL 33027 ~~PA~~Add

☐ Remove

\_\_\_\_\_ ☐ Change

15640 SW 16<sup>th</sup> Ct Add  
Pembroke Pines, FL 33027

 Remove

[Change](#)

Mr Carmine Spadaro 11567 Ben Dr. ☐ Add

156 / 600 Dr. ☐ Add

Lake Suzy, FL 34269 ☒ Remove

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16 DEC 19 11 54 AM  
COMMUNICATIONS SECTION  
ALABAMA, FLORIDA

16 DEC 16 PM 3:41  
DEPT OF STATE  
TALLAHASSEE, FLORIDA

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(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)

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 Dec 12, 2016, 2016

Signature of a member of authorized representative

Signature of a member or authorized representative of a member

Carmine Spadaro  
Typed or printed name of signee

Typed or printed name of signee