

L16000233793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

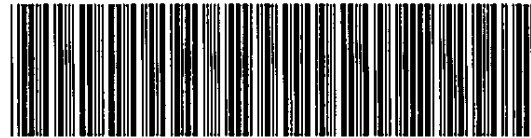
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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S Warren

JAN 19 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** JBR Auto Sales, 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:

Stephanie Ballesteros  
Name of Person  
JBR Auto Sales, Llc  
Firm/Company  
106 W. Seneca Ave. Ste # 52  
Address  
Tampa, FL. 33612  
City/State and Zip Code  
roberto-hanna@live.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Ballesteros 813 895-4380  
Name of Person at (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

OF

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

Page 1 of 3

**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>
MGR	Stephanie Ballesteros	2837 Butterfly Landing Dr.	<input checked="" type="checkbox"/> Add
		Land O Lake, FL 34638	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Roberto Luis Hanna Mendoza	100 West Davis Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, FL 33606	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Stephanie Ballesteros	2837 Butterfly Landing Dr.	<input checked="" type="checkbox"/> Add
		Land O Lake, FL 34638	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

This change can take place immediately.

[illegible]

**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 January, 11

2017

x   
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

x Roberto Houns M.

Typed or printed name of signee

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