

L17000054956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

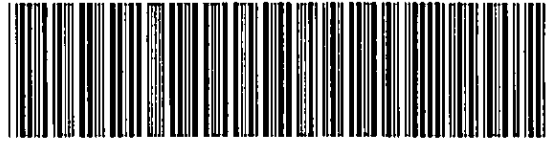
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
MAIL ROOM  
17 DEC 14 AM 11:36

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** JECEBE, 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:

Joseph Ehrlich

\_\_\_\_\_  
Name of Person

Losch & Ehrlich

\_\_\_\_\_  
Firm/Company

425 California Street, Suite 2025

\_\_\_\_\_  
Address

San Francisco, CA 94104

\_\_\_\_\_  
City/State and Zip Code

je@losch-ehrllich.com

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

For further information concerning this matter, please call:

Joseph Ehrlich

415

956-8400

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

JECEBE, LLC

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	Joseph Ehrlich	425 California Street, Suite 2025	<input type="checkbox"/> Add
		San Francisco CA 94104	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Scott Simmons	6115 Vista Linda Lane	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33433	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	David Band	5332 NW 77th Terrace	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33067	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 DEC 1964 AM 11:36

F. Effective date, if other than the date of filing: December 29, 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 December 12 2017

  
Signature of a member or authorized representative of a member

Joseph Ehrlich

Typed or printed name of signee