

**L17000055529**

\_\_\_\_\_  
(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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03/21/17--01016--017 \*\*25.00

17 APR -4 AM 11:22

FILED  
CLERK OF COURT  
CLERK OF COURT

APR 07 2017  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:**

J R Lynn ~~Sewels~~ Sewelers

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rachel Higgs

Name of Person

J R Lynn Sewelers

Firm/Company

7716 Caprio Dr.

Address

Boynton Beach, FL 33472

City/State and Zip Code

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

For further information concerning this matter, please call:

Julie Stephensen

Name of Person

at

561

Area Code

602 1784

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

already  
CR2E062 (9/15) paid - filled out incorrect form for name correction.

2017 APR -4 PM 2:11  
TALLAHASSEE, FLORIDA

TH



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 24, 2017

RACHEL HIGGS  
7716 CAPRIO DR  
BOYNTON BEACH, FL 33431

SUBJECT: JR LYNN JEWELERS  
Ref. Number: L17000055529

17 APR -4 AM 11:29

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

We have received your document for JR LYNN JEWELERS and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can only list one registered agent, not two. Please choose and list one. Please fill out section A to amend the name of the business to include the LLC suffix.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

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: 417A00005664

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: Jeff Lynn Jewelers

**SECOND:** The Florida Document number of the limited liability company is: L17000055529

**THIRD:** Document to be corrected is: Articles of Organization

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The form has Rachel Higgs instead of  
Higgs, Rachel L. First name is Rachel,  
last name is Higgs. The surname was inverted.

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☐ The electronic transmission of the record was defective.

Rachel Higgs 3/30/12  
Signature of Authorized Representative Date

Signature of new registered agent, if applicable : ( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**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.*

\_\_\_\_\_  
Registered Agent's Signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**