

L17000088701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

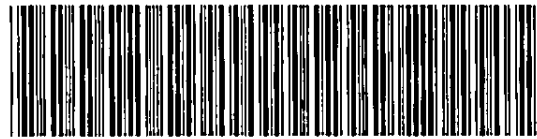
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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17 AUG -4 AM 7:10
NOTARY PUBLIC
ALLIANCE OF OREGON

AUG 07 2017
J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JG-EDAMS,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:

JUAN M. GARCIA

Name of Person

JG-EDAMS,LLC

Firm/Company

1767 HERMITAGE BLVD 11109

Address

TALLAHASSEE, FL 32308

City/State and Zip Code

INFO.SAEG@GMAIL.COM

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

For further information concerning this matter, please call:

JUAN M. GARCIA

786

766 8938

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

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	GLORIA BOLANOS		<input type="checkbox"/> Add
		1767 HERMITAGE BLVD 11109	<input checked="" type="checkbox"/> Remove
		TALLAHASSEE FL 32308	<input type="checkbox"/> Change
AMBR	MENDOZA MARCELA		<input type="checkbox"/> Add
		1767 HERMITAGE BLVD 11109	<input checked="" type="checkbox"/> Remove
		TALLAHASSEE FL 32308	<input type="checkbox"/> Change
AMBR	STEPHANIE GARCIA		<input type="checkbox"/> Add
		1767 HERMITAGE BLVD 11109	<input checked="" type="checkbox"/> Remove
		TALLAHASSEE FL 32308	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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17 AUG -4, AM 7:10
REC'D MAIL ROOM
FBI LABORATORY

1 AUG -4 AM 7:10
 MCC: 16-10-344
 110-10-344

(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)

(b) The 90th day after the record is filed.

Dated JULY 20 2017

Signature of a member or authorized representative of a member

JUAN M. GARCIA

Typed or printed name of signee