

L17000189835

(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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10/20/17--01027--010 ***25.00

DIVISION OF REVENUE

17 OCT 20 AM 9:18

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D. SIMMONS

OCT 24 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JIMBOS2CARS 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:

James R Garrison

Name of Person

JIMBOS2CARS AUTO SALES LLC

Firm/Company

1070 Shadick Drive Unit E

Address

Orange City, FL 32763

City/State and Zip Code

jimbos2cars@gmail.com

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

For further information concerning this matter, please call:

James Garrison

407 484 1610

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

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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10 OCT 20 04 15 PM
FILED

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

I would like to have the quotation marks removed from the LLC.

The business address added 1070 Shadick Drive Unit E Orange City FL 32763

17 OCT 20 AM 9:10
DIVISION OF REVENUE

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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 October 19 2017

James R Garrison

Signature of a member or authorized representative of a member

James R Garrison

Typed or printed name of signer