

**L17000 199763**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

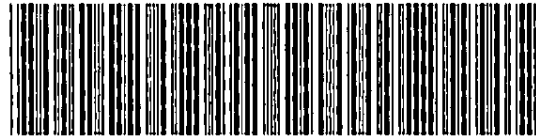
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**200323830592**

01/30/19--01004--012 \*\*35.00

R. WHITE  
FEB 18 2019

FILED  
2019 FEB 15 PM 12:10  
SEC. 1, STATE  
TALLAHASSEE, FL

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Joey Rolon Signature LLC  
DOCUMENT NUMBER: 217000199763

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Rolon

Name of Contact Person

Firm/ Company

401 SW 17th Ave. #205

Address

Miami, FL 33135

City/ State and Zip Code

rolongroup@gmail.com

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

For further information concerning this matter, please call:

Michelle Rolon

Name of Contact Person

at (305) 582-3956

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:



\$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

kindly see attached  
documents as requested.

February 5, 2019

MICHELLE ROLON  
401 SW 17TH AVE #205  
MIAMI, FL 33135

SUBJECT: JOEY ROLON SIGNATURE LLC  
Ref. Number: L17000199763

We have received your document for JOEY ROLON SIGNATURE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida corporation, but your entity is a Florida limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 619A00002570

RECEIVED

2019 FEB 15 PM 12:39

SECRET  
TALLAHASSEE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jucy Rolon Signature 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:

Michelle Rolon  
Name of Person

Firm/Company

401 SW 17th Ave, #205  
Address

Miami, FL 33135  
City/State and Zip Code

rolongroup@gmail.com  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Rolon at (305) 582-3956  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED

Joey Rolon Signature LK-C.

ALLANADEL, FL

09/26/2017

217000199763

name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1000

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

0 100 200 300 400 500 600 700 800 900 1000

\_\_\_\_\_

Enter Florida street address

, Florida

Zip Code

**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.*

**If Changing Registered Agent, Signature of New Registered Agent**

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>
HGR	Michelle Rolon	401 SW 17th Ave	<input type="checkbox"/> Add
		H205	<input checked="" type="checkbox"/> Remove
		Miami, FL 33135	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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)

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.

**Filing Fee: \$25.00**