

L17000251005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

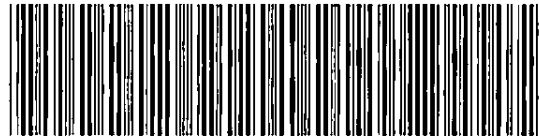
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Wmills reject form

Office Use Only



900437456049

10/03/24--01015--011 **2485.00

FILED
2024 NOV -5 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FL

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2024

WALTER THOMAS
2459 RYLAND FALLS DRIVE
LAKELAND, FL 33811

SUBJECT: LJ FISH ON 2, LLC
Ref. Number: L17000251005

We have received your document for LJ FISH ON 2, LLC and your check(s) totaling \$2485.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Wanite A Mills
Regulatory Specialist II

Letter Number: 924A00022998

2024 NOV -5 PM 3:11
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FL 32399

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LJ FISH ON 2, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Walter Thomas

Name of Person

Walter Thomas, P.A.

Firm/Company

2549 Ryland Falls Drive

Address

Lakeland, Florida 33811

City/State and Zip Code

walter@walterthomaspa.com

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

For further information concerning this matter, please call:

Walter Thomas

863

940-4855

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
2024 NOV - 5 PM 3:11
STATE OF FLORIDA
TALLAHASSEE, FL

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

INHSIS (2014)

FILED
2024 NOV -5 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FL