

L18000017653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

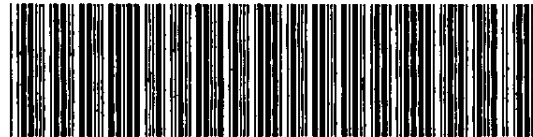
(Business Entity Name)

(Document Number)

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03/26/18--01039--012 **25.00

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2018 APR 12 PM 1:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 13 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

TRACEY-ANN JARRETT PHOTONOTIONS PHOTOGRAPHY, LLC

SUBJECT: _____
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:

MARTIN PENA

Name of Person

TRACEY-ANN JARRETT PHOTONOTIONS PHOTOGRAPHY, LLC

Firm/Company

2400 De Soto Dr

Address

Miramar, FL 33023

City/State and Zip Code

TJPHOTONOTIONS@ICLOUD.COM

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

For further information concerning this matter, please call:

MARTIN PENA

786 261-3161

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2018

MARTIN PENA
2400 DE SOTO DR
MIRAMAR, FL 33023

SUBJECT: TRACEY-ANN JARRETT PHOTONOTIONS PHOTOGRAPHY LLC
Ref. Number: L18000017653

We have received your document for TRACEY-ANN JARRETT PHOTONOTIONS PHOTOGRAPHY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout 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: 218A00006263

RECEIVED

2018 APR 12 AM 11:08

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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2018 APR 12 PM 1:38
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TRACEY-ANN JARRETT PHOTONOTIONS PHOTOGRAPHY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/19/18 and assigned
Florida document number L18000017653.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TRACEY & MARTIN PHOTONOTIONS PHOTOGRAPHY, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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2018 APR 12 PM 1:30
CLERK OF DISTRICT COURT
FLORIDA

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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>
AR	TRACEY-ANN JARRETT- PENA	2400 De Soto Dr	<input type="checkbox"/> Add
		Miramar, FL 33023	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	TRACEY-ANN JARRETT-PENA	2400 De Soto Dr	Add
		Miramar, FL 33023	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MARTIN PENA	2400 De Soto	Add
		Miramar, FL 33023	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AR	MARTIN PENA	2400 De Soto Dr	<input type="checkbox"/> Add
		Miramar, FL 33023,	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 SECRETARY OF STATE
 PALM BEACH COUNTY, FLORIDA

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

We just need to change the out titles as well as the company registered name.

Change the titles for Tracey-Ann Jarrett-Pena and Martin Pena from AR to Manager.

E. Effective date, if other than the date of filing: _____ **(optional)**

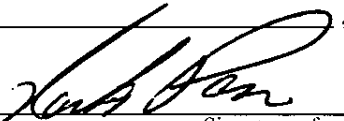
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 MARCH 16, 2018



Signature of a member or authorized representative of a member

MARTIN PENA

Typed or printed name of signer

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TALLAHASSEE FLORIDA