

118000041567

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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

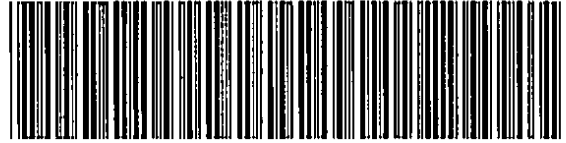
\_\_\_\_\_  
(Business Entity Name)

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
18 MAR -9 PM 7:18

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JCG INVESTMENT GROUP, 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:

Cheyenne Moseley

\_\_\_\_\_  
Name of Person

Legalzoom.com, Inc.

\_\_\_\_\_  
Firm/Company

101 N. Brand Blvd., 11th Floor

\_\_\_\_\_  
Address

Glendale, CA 91203

\_\_\_\_\_  
City/State and Zip Code

jimgcapt330@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

800 775-0888 ext. 9724

\_\_\_\_\_  
Name of Person

at ( )  
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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
<u>AMBR</u>	<u>James Giannotti</u>	<u>210 Tresana Blvd. #20</u>	<input type="checkbox"/> Add
		<u>Jupiter, FL 33478</u>	<input checked="" type="checkbox"/> Remove
		<u>_____</u>	
<u>AMBR</u>	<u>Christine Giannotti</u>	<u>210 Tresana Blvd. #20</u>	<input type="checkbox"/> Add
		<u>Jupiter, FL 33478</u>	<input checked="" type="checkbox"/> Remove
		<u>_____</u>	
<u>AMBR</u>	<u>James Giannotti</u>	<u>210 Tresana Blvd. #20</u>	<input checked="" type="checkbox"/> Add
		<u>Jupiter, FL 33478</u>	<input type="checkbox"/> Remove
		<u>_____</u>	
<u>AMBR</u>	<u>Christine Giannotti</u>	<u>210 Tresana Blvd. #20</u>	<input checked="" type="checkbox"/> Add
		<u>Jupiter, FL 33478</u>	<input type="checkbox"/> Remove
		<u>_____</u>	
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	

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

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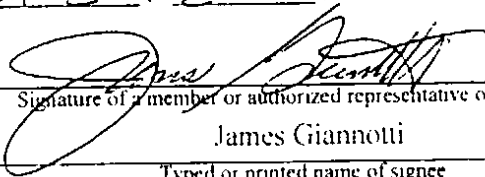
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 5, 2018

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
James Giannotti  
\_\_\_\_\_  
Typed or printed name of signer

FILED  
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TALLAHASSEE, FLORIDA  
18 MAR -9 PM 7:18