L1800047643

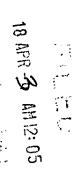
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J. LEGGETT APR 0 4 2018

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: JMG AUTO SALES, L	LC		
	ited Liab	ility Company	
Dear Sir or Madam:			
The enclosed Statement of Correction and fee(s) are submitted	for filing	Ţ.	
Please return all correspondence concerning this matter to the	following	;:	
JONAS MILLIEN			
Name of Person	,	-	
JMG AUTO SALES, LLC			
Firm/Company		-	
4070 NW 132ND STREET BAY	′ G		
' ' Address		-	
OPA LOCKA, FL 33054			
City/State and Zip Code		-	
millienjonas@yahoo.com			
E-mail address: (to be used for future annual report notif	ication)	-	
5			
For further information concerning this matter, please call:			
JONAS MILLIEN 78	86	,488-7711	
	rea Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:			
\$25 Filing Fee \$30 Filing Fee & S55 F Certificate of Status Certified	iling Fee Copy	& S60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (9/15)			

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: JMG AUTO SALES, LLC The Florida Document number of the limited liability company is: $\underline{L18000042643}$ SECOND: Document to be corrected is: Articles of Organization (Address Only) THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT $\overline{\mathbf{x}}$ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Please update our principal address on the Articles of Organization to: 4070 NW 132ND STREET BAY G OPA LOCKA, FL 33054 <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR П The electronic transmission of the record was defective. Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2506270/19