

L19000137597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

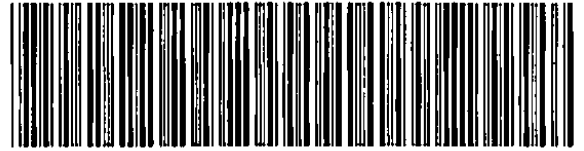
(Business Entity Name)

(Document Number)

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F I L E D

JUL 13 2019

T SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JLSI Enterprises, 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:

Justin Smith

Name of Person

Firm/Company

2315 Beach Drive SE

Address

St Petersburg, FL 33705

City/State and Zip Code

justinlsmith1@yahoo.com

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

For further information concerning this matter, please call:

Justin Smith

Name of Person

727
at ()

Area Code

~~202-8675~~ 278-6905

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager

AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
MGR	Justin Smith Justin L. Smith	2315 Beach Drive SE St St Petersburg FL 33705	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Change Justin Smith's Title to MGR	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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SHELBY COUNTY STATE
TALLAHASSEE FLORIDA

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SOCIAL AFFAIRS DIVISION
TALLAHASSEE, FLORIDA

(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 (**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.

June, 20
Dated 6-10-2019 2019

Signature of a member or authorized representative of a member
Justin L. Smith
Typed or printed name of signee