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(Red	questor's Name)	
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(City	y/State/Zip/Phone	:#)
PICK-UP	∏ WAП	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	<u>.</u>
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Office Use Only



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COVER LETTER

Division of Corporations			
SUBJECT: CJ BRANDING LLC			
Name of Foreig	ın Limited Liab	oility Con	npany
Dear Sir or Madam:			
The enclosed application, certificate and fee(s)	are submitted	for filing	
Please return all correspondence concerning th	is matter to the	followin	ā:
JULIANA PERRY			
Name of Person		_	
CFBRANDING LLC			
Firm/Company		_	
5315 MOON SHELL DRIVE			•
Address		-	.:
APOLLO BEACH / FLORIDA / 33572			`
City/State and Zip Cod	e	-	
JULIANA@CJBRANDING.COM			
E-mail address: (to be used for future annua	l report notifica	ition)	
For further information concerning this matter.	please call:		
JULIANA PERRY	240 at (252-88	10
Name of Person	_ ` \	& Dayt	ime Telephone Number
Mailing Address:		Street Ac	ddress:
Registration Section		Registra	ation Section
Division of Corporations			n of Corporations
P.O. Box 6327			ntre of Tallahassee
Tallahassee, FL 32314			. Monroe Street, Suite 810 ssee, FL 32303
Enclosed is a check for the following	amount:		
■\$25 Filing Fee □ \$30 Filing Fee &	☐ \$55 Filing	Fee &	☐ \$60 Filing Fee,
Certificate of Status	Certified (Сору	Certificate of Status & Certified Copy
CR2E055 (9/15)			

June 3, 2020

To whom it may concern,

I formed an LLC corporation with Sunbiz on January 29, 2020. The legal name of the corporation is CJ Branding LLC with a document number of L20000040686. I was informed that we neglected to add the authorized members. I have included the necessary forms as required by the State of Florida adding Juliana Perry and Crystal Pepkowski as authorized members along with the \$25 fee to cover these changes.

Juliana Perry

Date of this notice: 01-28-2020

Employer Identification Number: 84-4474943

Form: SS-4

Number of this notice: CP 575 B

CJ BRANDING LLC JULIANA PERRY MBR 5315 MOON SHELL DR APOLLO BEACH, FL 33572

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 84-4474943. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065 03/15/2021

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.



June 23, 2020

JULIANA PERRY 5315 MOON SHELL DR APOLLO BEACH, FL 33572

SUBJECT: CJ BRANDING LLC Ref. Number: L20000040686

We have received your document for CJ BRANDING 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 form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Letter Number: 320A00012422

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comman (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company volument number <u>L20000 40686</u> .	vere filed on February 4/2000 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil NA The new name must be distinguishable and contain the words "Limited Liability".	
Enter new principal offices address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	20 70
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u> B. If amending the registered agent and/or registered office a	ddress 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: Apollo	Perry 315 Moon Shell Drive Enter Florida street address Boach, Florida 33572, 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>	Address	Type of Action
Auth M	Juliana Perry	5315 Moon shell Dr	§å Ad d
AMBE		Apollo Beach, FL 33572	□Remove
			□Change
AMBI	CRYSTAL Reptausti	23 Deer Road	& I Add
		23 Deer Road Fromproof, FL 33860	□Remove
			□Change
			□Add
			□Remove
			Change
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Effective da	te, if other th	an the date	of filing:				_ (op	tional)	
fan effective	date is listed, the date inserted in	date must be spe	ecitic and ca	annot be prior	r to date of lib	ng or more th	an 90 days at airements, t	ier filing.) Pu his date wil	rsuant to 605.020 I not be listed a
document's	effective date of	n the Departn	ient of Sta	ate's records		·, ······· · · · · · · ·			
e record spec rd is filed.	ifies a delayed	effective date.	, but not a	n effective t	ime, at 12:0	La.m. on the	e earlier of:	(b) The 9	Mh day after th
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Dated	TULY	_2_		<u> 2020</u>	<u> </u>	. 🔿			
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	 .	Signa	ture of a me	ember or aut	orized tepres	entative pla	nember		

Filing Fee: \$25.00