

L200000105303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

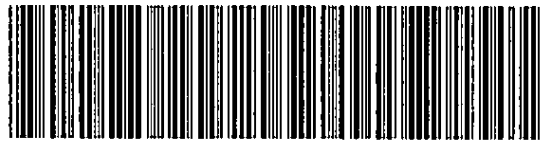
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JDL International, 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:

DAVE HORAN
Name of Person

JDL International, LLC
Firm/Company

20308 Chestnut Grove Drive
Address

Tampa FL 33647
City/State and Zip Code

HORAN@jdl.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William P. Flynn at (773) 447-3667
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

N *Neurospora crassa*

21 OCT 12 PM 1:06

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

Title Name Address Type of Action

AMBR William P. Flynn

Please:
Change of Title to AMBR

1900 South Federal St #D ☒ Add

Chicago IL 60616 ☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

AMBR John Neving

90 Fisherville Rd ☐ Add

Ste 606 ☒ Remove

Toronto, Ontario M2R 3J9 ☐ Change
CH

☐ Add

☐ Remove

☐ Change

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☐ Change

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

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Please change my title TO: AMBR
and REMOVE existing title of Managing Partner

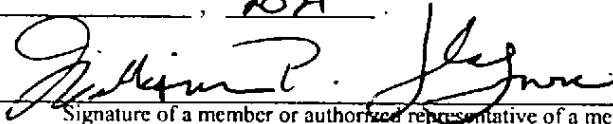
E. Effective date, if other than the date of filing: _____ (optional)

(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 OCT 5, 2021



Signature of a member or authorized representative of a member

William P. Flynn

Typed or printed name of signee