

L22000189909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

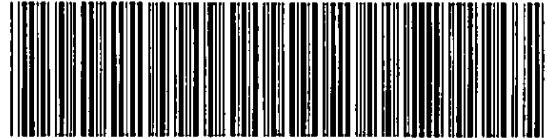
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Special Instructions to Filing Officer:

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SEP - 6 2022

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2022 JUN 15 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

40

## COVER LETTER

**TO: Registration Section  
Division of Corporations  
K & J LLC**

**SUBJECT:** \_\_\_\_\_  
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:

Schkenna Fulton-Neloms

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

K & J LLC

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

2919 Phillips highway

\_\_\_\_\_  
Address

Jacksonville, Florida 32207

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

schkenna@yahoo.com

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

For further information concerning this matter, please call:

Schkenna Fulton-Neloms

904

655-7473

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

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RECORDS CLERK OF THE  
TALLAHASSEE, FLA.

**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>            | <u>Address</u>                     | <u>Type of Action</u>                      |
|--------------|------------------------|------------------------------------|--|
| MGR          | Johnny Neloms JR       | 2919 Phillips highway Jax FL 32207 | <input type="checkbox"/> Add               |
|              |                        |                                    | <input checked="" type="checkbox"/> Remove |
|              |                        |                                    | <input type="checkbox"/> Change            |
| MGR          | Schkenna Fulton-Neloms | 2919 Phillips highway Jax FL 32207 | <input checked="" type="checkbox"/> Add    |
|              |                        |                                    | <input type="checkbox"/> Remove            |
|              |                        |                                    | <input type="checkbox"/> Change            |
|              |                        |                                    | <input type="checkbox"/> Add               |
|              |                        |                                    | <input type="checkbox"/> Remove            |
|              |                        |                                    | <input type="checkbox"/> Change            |
|              |                        |                                    | <input type="checkbox"/> Add               |
|              |                        |                                    | <input type="checkbox"/> Remove            |
|              |                        |                                    | <input type="checkbox"/> Change            |
|              |                        |                                    | <input type="checkbox"/> Add               |
|              |                        |                                    | <input type="checkbox"/> Remove            |
|              |                        |                                    | <input type="checkbox"/> Change            |
|              |                        |                                    | <input type="checkbox"/> Add               |
|              |                        |                                    | <input type="checkbox"/> Remove            |
|              |                        |                                    | <input type="checkbox"/> Change            |

[illegible]

(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)

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 June 11, 2022.

Sakuma Tetsu Helms

Signature of a member or authorized representative of a member

## Schkenna Fulton-Neloms

Typed or printed name of signee