

L22000266078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

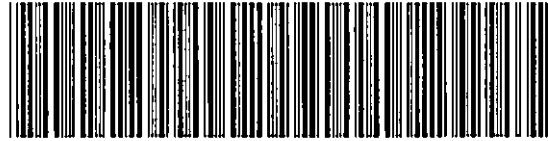
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600389431596

00 21/02--01014--J10 \*\*00.00

FILED  
2022 JUN 21 AM 10:52  
CLERK OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jackie Kramer Photography Fine Art, 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:

Kelly Rossberg

Name of Person

Jackie Kramer Fine Art, LLC

Firm/Company

4791 Europa Dr.

Address

Naples, FL 34105

City/State and Zip Code

northerndesigns22@hotmail.com

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

For further information concerning this matter, please call:

Kelly Rossberg

907 317-6223  
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, **FILED**  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

2022 JUN 21 AM 10:52  
TALLAHASSEE, FL

**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

**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>
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 JUN 21 AM 10:52  
FILED  
TALLAHASSEE, FL  
COUNTY CLERK'S OFFICE

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

The correct addresses for both Managers are:

Jacqueline Kramer

6717 Hidden Creek Blvd.

St. Augustine, FL 32086 USA

USA

Kelly Rosenberg

4791 Europa Dr.

Naples, FL 34105

USA

FILED  
2022 JUN 21 AM 10:52  
TALLAHASSEE, FL

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

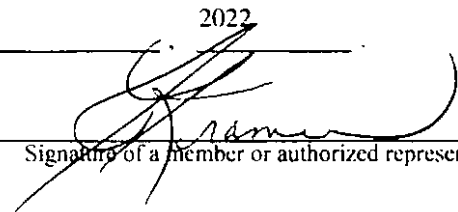
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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 June 14

2022

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Jacqueline Kramer

\_\_\_\_\_  
Typed or printed name of signee