

L23000109555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

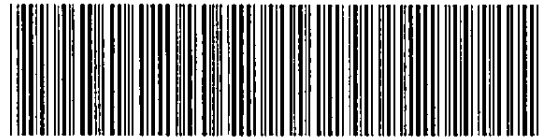
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SEP 18 2024

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FILED
2024 SEP 17 AM 9:57
TALLAHASSEE, FLORIDA

RECEIVED
2024 SEP 17 PM 4:24
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$ 25.⁰⁰

AUTHORIZATION SIGNATURE: _____

Way AJF Holding LLC
BUSINESS (Name)

James Kelly

L23000109555

Document #

☒ Walk in

____ Pick up time _____

____ Mail out

____ Will wait

____ Photocopy

____ Certified Copies of Articles of Organization

____ Certificate of Status

NEW FILINGS

____ Profit
____ Not for Profit
____ Limited Liability
____ Domestication
____ CORP
____ LLLP

AMMENDMENTS

____ Amendment
____ Resignation of R.A. Officer/Director
☒ Change of Registered Agent
____ Dissolution/Withdrawal
____ Merger
____ Conversion

OTHER FILINGS

____ Annual Report
____ Fictitious Name
____ APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

____ Foreign Filing
____ Limited Partnership
____ Reinstatement
____ Trademark
____ Other

EXAMINER'S INITIALS: _____

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2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
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Way AJF Holding LLC
BUSINESS (Name)

for full
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WAY AJF HOLDING LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALBERTO BECERRA, ESQ.

Name of Person

DIANA C. GUERRERO PLLC

Firm/Company

P.O. BOX 14-5141

Address

CORAL GABLES, FL 33114

City/State and Zip Code

alberto@dcgfirm.com

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

For further information concerning this matter, please call:

ALBERTO BECERRA, ESQ.

at (305)

428-2176

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy