

L23000414896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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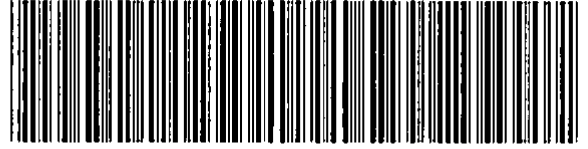
(Business Entity Name)

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SECRETARY OF STATE
201 Adams Street, 11th Floor
COLUMBIA, SC 29201-1000

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jos antojitos 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:

Johanna D Jaquez Hernandez

Name of Person

Firm/Company

2020 Thrace st

Address

Tampa/Fl 33605

City/State and Zip Code

johannacj26@gmail.com

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

For further information concerning this matter, please call:

Johanna D Jaquez Hernandez

813 278-0163

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

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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04/23/2024

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.

Dated 04/19

2024

Pharmal. Jeyaraj
Signature of a member or authorized

Signature of a member or authorized representative of a member

Johanna D Jaquez Hernandez

Typed or printed name of signee

Filing Fee: \$25.00