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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

NOV 16 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: J.K.C. WEN, L.C.**  
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:

**Sam W. Chawkin**

Name of Person

**J.K.C. Wen, L.C.**

Firm/Company

**700 Park Regency Place NE, Suite 2403**

Address

**Atlanta, GA 30326**

City/State and Zip Code

**samchawk@comcast.net**

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

For further information concerning this matter, please call:

**Sam W. Chawkin**

Name of Person

at ( **404** )

**261-2164**

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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:**

**MGR = Manager**

**MGRM = Managing 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"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated November 11, 2009.

*Sam W. Chawkin, Managing Member*  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

**Sam W. Chawkin, Managing Member**  
 \_\_\_\_\_  
 Typed or printed name of signee

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 TALLAHASSEE, FLORIDA  
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To WHOM IT MAY CONCERN:

The undersigned is a member of S/P ASSOCIATES LLC, a Florida limited liability company whose principal address is 4067 NW 35<sup>th</sup> Avenue, Lauderdale Lakes FL 33309 which was formed on January 4, 2008, but is now inactive. The undersigned, on behalf of S/P ASSOCIATES LLC, hereby releases and relinquishes all rights to use the name "S/P ASSOCIATES LLC" so that J.K.C. WEN, L.C., a Florida limited liability company, may change its name to S & P ASSOCIATES, LLC.

In Witness Whereof, this 10<sup>th</sup> day of November, 2009.

S/P ASSOCIATES LLC

By: Antonio K. Prospect

ANTONIO K. PROSPECT, Member

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