

M11000003115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

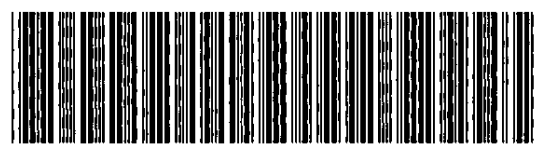
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300239613183

10/03/12--01017--011 **50.00

FILED
2012 OCT -3 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
OCT 11 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JNF ENTERPRISE, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISA SHULTS

Name of Person

CORPORATE DIRECT, INC.

Firm/Company

2248 MERIDIAN BLVD., STE H

Address

MINDEN, NV 89423

City/State and Zip Code

INFO@CORPORATEDIRECT.COM

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

FILED
2012 OCT -3 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

LISA SHULTS

Name of Person

at (775)

284-7167

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: JNF ENTERPRISE, LLC

2. Jurisdiction of its organization: INDIANA

3. Date authorized to do business in Florida: 06/17/2011

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? _____

5. New name of the limited liability company: _____
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

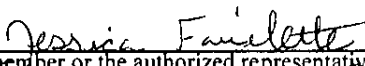
6. If the amendment changes the period of duration, indicate new period of duration: _____

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: PLEASE CHANGE THE MANGER TO READ: WYOMING STATE

INVESTMENTS, LLC (MANAGER).

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

JESSICA FAMILLETTE
Typed or printed name of signee

Filing Fee: \$25.00

2012 OCT -3 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED