

M16000002107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

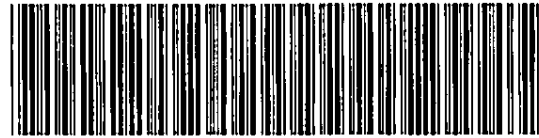
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2018 JUN -4 AM 8:01
TALLAHASSEE FL 32309

JUN 05 2018
J. HARRIS

254117-8744

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jimmie Allen Management, 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:

Dawn Guidry
Name of Person

Jimmie Allen Management, LLC
Firm/Company

P.O. Box 150274
Address

Cape Coral, FL 33915
City/State and Zip Code

management@jammanagement.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janelle Jackson at (517) 881-3134
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2018

DAWN GUIDRY
PO BOX 150274
CAPE CORAL, FL 33915

SUBJECT: JIMMIE ALLEN MANAGEMENT, LLC
Ref. Number: M16000002107

We have received your document for JIMMIE ALLEN MANAGEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 918A00010438

RECEIVED

2018 JUN -4 PM 1:08

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FL 32314

2018 JUN -4 AM 9:01

FILED

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Jimmie Allen Management, LLC

Enter new principal office address, if applicable:

(Principal office address)
MUST BE A STREET ADDRESS

N/A

Enter new mailing address, if applicable:

(Mailing address)
MAY BE A POST OFFICE BOX

N/A

2. The Florida document number of this limited liability company is: 116000002107

3. Jurisdiction of its organization: Michigan

4. Date authorized to do business in Florida: 3/11/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Jimmie Allen Accounting & Management, LLC
(must contain "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 contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
------------------------	-------------	----------------	-----------------------

CEO Janelle Jackson 20 W. Washington, Suite 11 ☒ Add
Clarkston, MI 48346 ☐ Remove

_____ Add

☐ Remove

_____ ☐ Add

☐ Remove

_____ ☐ Add

☐ Remove

_____ ☐ Add

9. Attached is a certificate, if required: 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 the authorized representative

Dawn M. Quinary
Typed or printed name of signee

2010 JUN -4 AM 8:01
Remove
FBI ASST. ATTY. GEN.
FBI ASST. ATTY. GEN.

100

Filing Fee: \$25.00

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU															
Date Received	ACI	P 4 EXEMPT (FOR BUREAU USE ONLY) ADJUSTED PURSUANT TO TELEPHONE AUTHORIZATION													
MAY 18 2018	This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4" style="padding: 5px;">Name <u>Dawn Guidry</u></td> </tr> <tr> <td colspan="4" style="padding: 5px;">Address <u>P.O. Box 150274</u></td> </tr> <tr> <td style="width: 25%; padding: 5px;">City <u>Cape Coral</u></td> <td style="width: 25%; padding: 5px;">State <u>FL</u></td> <td colspan="2" style="padding: 5px;">ZIP Code <u>33915</u></td> </tr> </table>				Name <u>Dawn Guidry</u>				Address <u>P.O. Box 150274</u>				City <u>Cape Coral</u>	State <u>FL</u>	ZIP Code <u>33915</u>	
Name <u>Dawn Guidry</u>															
Address <u>P.O. Box 150274</u>															
City <u>Cape Coral</u>	State <u>FL</u>	ZIP Code <u>33915</u>													
EFFECTIVE DATE.		MAY 21 2018													

FILED

ADMINISTRATOR
CORPORATIONS DIVISION

CERTIFICATE OF AMENDMENT TO THE ARTICLES OF ORGANIZATION

For use by Limited Liability Companies
(Please read information and instructions on the last page)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned execute the following Certificate of Amendment

1	The present name of the limited liability company is: <u>Jimmie Allen Management, LLC</u>
2	The identification number assigned by the Bureau is: <u>801588994</u>
3	The date of filing the original Articles of Organization was: <u>2/24/2011</u>
4	Article <u>I</u> of the Articles of Organization is hereby amended to read as follows: <u>New name of business: Jimmie Allen Accounting & Management, LLC</u>
5	<input type="checkbox"/> The amendment was approved by a majority in interest if an operating agreement authorizes amendment of the articles of organization by majority vote <input checked="" type="checkbox"/> The amendment was approved by unanimous vote of all the members entitled to vote.

This document is hereby signed as required by Section 103 of the Act.

Signed this 8th day of May, 2018

By Dawn M Guidry
(Signature of Member, Manager, or Authorized Agent)

Dawn M Guidry
(Type or Print Name and Capacity)

LF

