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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	me of the limited liability company:	C			
	421 NE 6TH ST.	(b) 4	(b) 421 NE 6TH ST.		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	UNIT 312	U	NIT 312		
	FORT LAUDERDALE, FL 33304	<u> </u>	ORT LAUDERDALE, FL 33304		
	01/07/2021	L2	10XXX124979		
3.	Date of filing/registration in Florida	4.	Document number		
	RAYMOND MAZZIE				
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida De	pt, of State:		
	421 NE 6TH ST.				
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)			
	UNIT 312		2021		
	FORT LAUDERDALE , F	L	2021 JAN		
(b)	Corporate Creations Network Inc.				
(0)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office addre	<u>ss</u> :		
	801 US Highway 1		# 5: 33		
	NEW Registered Office Address:				
	Next Dalm Banch	33408			
		FL			
chang	limited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	liability com	pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in		
1110 01	16 at	Kevin	Duteau, Attorney-in-Fact		
Sign	nature of a member or authorized representative of a member		Printed or typed name of signee		
provi the or	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provide the reflect a change in the registered office address, ed in writing of this change.	ded for in Ch I hereby con	apter 605, F.S. Or, if this document is being file firm that the limited liability company has been		
	Medit Kevin Duteau, Speci	ial Secretary	•		
Signa	iture of Registered Agent				