## C/8000064027

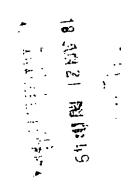
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JUN 21 2018

## COVER LETTER

Division of Corporations JEDI EQUITY PARTNERS LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Jenner Name of Person EMJAY GROUP LLC Firm/Company 1401 Brickell Ave, Ste 320 Address Miami, FL 33131 City/State and Zip Code mike@emjay.group E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Jenner Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee

TO:

**Registration Section** 

## 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.

1.	Na	me of the limited liability company:	PARTN	IERS LLO	
2.	(a)		(b)		
	, ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	M	lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
2		Date of filing/registration in Florida			000064027
3.		Date of mingregistration in Florida	4.		Document number
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		٠ 📆
		, FL_			
	(b)	EMJAY GROUP LLC			
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			F
		1401 Brickell Ave			E S
		NEW Registered Office Address:			*
		Ste 320			
		Miami , FL	33131		
the ag wa	cha ent v is/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of less of organization or the operating agreement of the	the regist bility cor f the limi	ered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	$\sum$		Mich	ael Jenne	er
I i pro the to no	herel ovisi ovisi obli mere tifiet	une of a member or authorized representative of a member ov accept the appointment as registered agent and agreeous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have been accompanied to the change of this change.	ee to act i performa I for in Ci sereby coi	in this capa nce of my a hapter 605, nfirm that t	Printed or typed name of signee city. I further agree to comply with the cuties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Sr	gnatu	e of Registered Agent			