A03000001615

(Re	questor's Name)	-			
(Ad	dress)				
(Address)					
(Cit	y/State/Zip/Phone	÷#)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
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COVER LETTER

TO:	Registration Section						
	Division of Corporations						
SUBJECT: JARRETT PROPERTIES LTD.							
	Name of Limited Partners	ship or Lim	ited Liabil	ity Limited Partnership			
DOC	UMENT NUMBER:	A	03000	001615			
The e	nclosed Statement of Change of Re	enistered (Office an	d/or Registered Agent and			
	are submitted for filing.	gistered	mice an	d/of Registered Agent and			
	2						
Please	e return all correspondence concern	ing this m	natter to:				
P. HUTCHISON BROCK, II, ESQUIRE							
	Contact Person						
	BROCK LAW, LLC						
	Firm/Company			_			
	2145 CYPRESS RIDGE BLV	VD, #202	I •				
	Address	· · · · · · · · · · · · · · · · · · ·		•			
	WESLEY CHAPEL, FL 3	3544					
	City, State and Zip Code			_			
	HBROCK@BROCK-L	AW COL	A				
E	E-mail address: (to be used for future annu-						
For 6	urther information concerning this r	mattar nle	naa aalle				
roi n	utulet information concerning this i	nauer, pre	ase can.				
	HUTCH BROCK	at (813	333-7267			
	Name of Contact Person	A	rea Code a	and Daytime Telephone Number			
Enclo	osed is a \$35.00 check made payable	e to the F	lorida De	epartment of State.			
STRI	EET ADDRESS:		MAII	ING ADDRESS:			
	stration Section		Registration Section				
	ion of Corporations		Division of Corporations				
	on Building		P. O. I	Box 6327			
	Executive Center Circle		Tallah	assee, FL 32314			
Tallal	hassee, FL 32301						

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	JARRETT PROPE	RTIES	I LTD	
Nan	ne of Limited Partnership or Limited	Liability L	imited Partnership	
2. 11	I - 17-2003	3.	A03000001615	;
Date of filing/	registration in Florida	<u></u>	Florida document numbe	
4. The name of the reg Department of State:	sistered agent and the registered offic	e address a	s shown on the records of	the Florida
	LEONARD H. JC	HNSON		
-	Name			
	37837 MERIDIAN	AVE, #3	14	
	Address			
_	DADE CITY, FL	. 33525		
	City, State and	Zip		
5. The name and Flori	da street address of the new registere	d agent and	l/or office:	7017 7017
	P. HUTCHISON B	ROCK,	<u> </u>	SEP 3 SEP
	Name			
	2145 CYPRESS RIDG	E BLVD,	, #202	55 TO T
•	Florida street address (P.O. B	ox not acce	eptable)	
	WESLEY CHAPEL	FL	33544	AHII: 18
•	City, State and	Zip	·	E 6
6. Such change(s) is/a Signature of General P	re effective when filed by the Florida	Departme	nt of State.	
comply with the provis	pointment as registered agent and ag ions of all startes relative to the pro an accept the obligations of my posi d Agent	per and co	mplete performance of my	

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50