L02000001104

(Requestor's Name)				
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

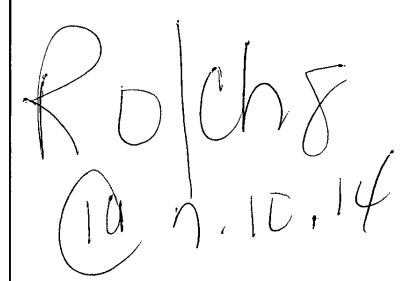




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COVER LETTER

TO: Registration Section Division of Corporations				
John H. McCorvey, Jr., P.L.				
	nited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Char	ge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
John H. McCorvey, Jr.				
Name of Person				
John H. McCorvey, Jr., P. L.				
Firm/Company				
301 W. Bay Street, Suite 1458				
Address				
Jacksonville, Florida 32202				
City/State and Zip Code				
john@jacksonvillefloridalawyers.com				
E-mail address: (to be used for future annual repo	rt notification)			
For further information concerning this matter, please of	all:			
John H. McCorvey Jr. 9	04 329-7237			
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	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

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. N	ame of the limited liability company: John H. McCo	orvey, Jr., I	P.L.		
2. (a)	301 W. Bay Street	(b) 30	(h) 301 W. Bay Street		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (,,_	Mailing address of limite (Note: MAY BE POS		
	Suite 1458	Sı	uite 1458		
	Jacksonville, Florida 32202		acksonville, Florida 322	202	
	December 31, 2001	LO2	2000001104		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	John H. McCorvey, Jr.				
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dep	t. of State:		
	1912 Hamilton Street				
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)			
	Suite 204				
	Jacksonville FL	32210			
	, • •	· · · · · · · · · · · · · · · · · · ·			
(b)		· - ·		•	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address	ji	7 42	
	301 W. Bay Street			ESTATE BY JUN 25	
	NEW Registered Office Address:			127 TE	
	Suite 1458			70 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
	Jacksonville	32202		3	
the cha agent was w the art Signa I here provis the ob- to mer	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liaere authorized by an affirmative vote of the members of ides of organization of the operating agreement of the florida member or authorized representative of a member by accept the appointment as registered agent and agrifunctions of all statutes relative to the proper and complete lightions of my position as registered agent as provided by reflect a change in the registered office orderss, I if a myriting of this change.	the registere ability compared the limited limited liabi	ed office and the business of any, it is hereby confirmed to liability company or as oth lity company. Printed or typed name of this capacity. I further gare	Tice of the registered that the change(s) erwise provided in	

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00