## L02000015046

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D. ERUCE

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUB.			ERPRISE Liability Co			
Dear	Sir or Madam:					
The e	enclosed Registered Agent/Registered (	Office (	Change and f	ee(s) are subm	itted for filing.	
Pleas	e return all correspondence concerning	this m	atter to the fo	ollowing:		
	JOHN FIGH					
	Name of Person					
JACIN ENTERPRISES L.L.C.			2013			
	Firm/Company				が記れる	TI AON
	6310 GRAND BAHAMA CI	R			Hir Cres	•
	Address				1	PM 1: 09
	TAMPA, FL 33615-4204 City/State and Zip Code	<del></del>			<b>5</b> **	· (2
	JACKFIGH@VERIZON.NE E-mail address: (to be used for future annual report	T notification	on)			
For t	further information concerning this mat	ter, ple	ase call:			
	JOHN FIGH	at (			1-3349	
	Name of Person		Area C	ode & Daytime Te	lephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, Florida 323		
	Enclosed is a check for the followi	ng amo	ount:			
	<b>✓</b> \$25 Filing Fee		\$55 Fil	ing Fee & Cer	tified Copy	

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

Name of the limited liability company:	JACIN ENTERPRISES L.L.C.		
2. (a) Principal office address of limited liability cor	mpany: JACIN ENTERPRISES L.L.C.		
(Note: MUST BE STREET ADDRESS)	6310 GRAND BAHAMA CIR TAMPA, FL 33615-4204		
(b) Mailing address of limited liability company:	JACIN ENTERPRISES L.L.C.		
(Note: MAY BE POST OFFICE BOX)	6310 GRAND BAHAMA CIR TAMPA, FL 33615-4204		
6/17/2002	L02000015046		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office show	on the records of the Florida Dept. of State:		
Registered Agent:	JOHN FIGH		
Registered Office Address:	JACIN ENTERPRISES L.L.C.— 10446 SAINT TROPEZ-PL TAMPA, FL 33615-4213		
(b) Enter name of <b>NEW Registered Agent</b> and/o			
<u><b>NEW</b></u> Registered Agent:	<u>→</u>		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	JACIN ENTERPRISES L.L.C. 6310 GRAND BAHAMA CIR TAMPA ,FL 33615-4204		
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability or the l	er the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization npany.		
JOHN FIGH			
Printed or typed name of signee	<del></del>		
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability confirms the liability confirms the limited liability confirms the liability confirms	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.		
Signature of Registered Agent			

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