

102000015046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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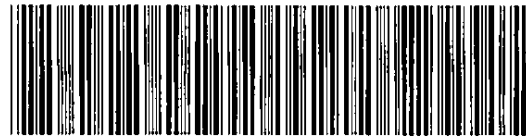
(Business Entity Name)

(Document Number)

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S. WARREN

JUN 30 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JACIN ENTERPRISES L.L.C.

\_\_\_\_\_  
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:

JOHN FIGH

\_\_\_\_\_  
Name of Person

JACIN ENTERPRISES L.L.C.

\_\_\_\_\_  
Firm/Company

9614 BAY GROVE LN

\_\_\_\_\_  
Address

TAMPA, FL 33615-4318

\_\_\_\_\_  
City/State and Zip Code

JACKFIGH@VERIZON.NET

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN FIGH

813

334-3349

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

**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. Name of the limited liability company: JACIN ENTERPRISES L.L.C.

2. (a) JACIN ENTERPRISES L.L.C.

(b) JACIN ENTERPRISES L.L.C.

Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

9614 BAY GROVE LN

9614 BAY GROVE LN

TAMPA, FL 33615-4318

TAMPA, FL 33615-4318

6/17/2002

L02000015046

3. Date of filing/registration in Florida

4. Document number

5. (a) JOHN FIGH

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

JACIN ENTERPRISES L.L.C.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

6310 GRAND BAHAMA CIR

TAMPA, FL 33615-4204

(b)

Enter name of NEW Registered Agent and/or NEW Registered Office address:

JACIN ENTERPRISES L.L.C.

NEW Registered Office Address:

9614 BAY GROVE LN

TAMPA, FL 33615-4318

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization of the operating agreement of the limited liability company.

JOHN FIGH  
Signature of a member or authorized representative of a member

JOHN FIGH

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

JOHN FIGH  
Signature of Registered Agent