

104000055929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

104-55929

2008 JAN 2 10:00 AM

2008 JAN 2 10:00 AM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JCA Construction LLC
(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:

Wanda Adams
(Name of Person)

JCA Construction LLC
(Firm/Company)

3193 Newmark Dr.
(Address)

Deltona FL 32738
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Javier LaTorre at (561) 856-4750
(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

* \$35 check has previously been submitted: See cover letter
INHS18 (8/05)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2007

WANDA ADAME
3193 NEWMARK DR
DELTONA, FL 32738

SUBJECT: JCA CONSTRUCTION LLC
Ref. Number: L04000055929

We have received your document for JCA CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 507A00063460

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TALLAHASSEE, FLORIDA

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.

1. The name of the limited liability company is: JCA Construction LLC.

2. The mailing address of the limited liability company is : 3193 Newmark Dr.
Deltona FL 32738

7/28/2004
3. Date of filing/registration in Florida

L04000055929
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Julio C. Adame
Name
3193 Newmark Dr.
Address
Deltona FL 32738
City, State and Zip

6. The name and address of the new registered agent and/or office:

Wanda Fuentes
Name
3193 Newmark Dr.
Florida street address (P.O. Box NOT acceptable)
Deltona FL 32738
City, State and Zip

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 or the operating agreement of the limited liability company.

Wanda Adame
(Signature of a member or authorized representative of a member)

Wanda Adame
(Printed or typed name of signer)

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 608, 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.

Jean
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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