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SECTETARY OF STATE TALLAHASSEF, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations	
JAM-Renterprises LLC	
Na	me of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
Rolf-Michael Born	
Name of Person	
JAM-renterprises LLC	
Firm/Company	
124 Plantation Blvd	
Address	
Lake Worth, FL 33467	
City/State and Zip Code	
rolf@jam-renterprises.com	
E-mail address: (to be used for future ar	nnual report notification)
For further information concerning this matte	r, please call:
Rolf-Michael Born	561-714-4005
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng amount:
≥ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

TO:

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

(a)	time of the limited liability company: JAM-Rente 124 Plantation Blvd	(b) 124 Plantation Blvd		
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lake Worth, FL 33467		Lake Wor	th. FL 33467
	10/21/2019	· · · · · · · · · · · · · · · · · · ·	L04000064	4258
	Date of filing/registration in Florida	4.	l	Document number
(a)	Jeanne Ellen Born			
Je Reg	Registered Agent and Registered Office shown on the records Jeanne Ellen Born	of the Florid	la Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREA	EET ADDRESS)		7019 OF TALLU
	124 Plantation Blvd		 	F. SECTOR OF SECTOR
				FILE 2019 OCT 23 TALLAHASSE
(b)	124 Plantation Blvd Lake Worth	5L_33467	,	FILEL MISOCT 23 PH SECRETARY OF TALLAHASSEE. F
(b)	124 Plantation Blvd	FL_33467	,	FILED 10119 OCT 23 PH 12: C SECRETARY OF STA SECRETARY OF STA SECRETARY OF STA
(b)	124 Plantation Blvd Lake Worth	FL_33467	,	MISOCT 23 PH 12: 04 SECRETARY OF STATE SECRETARY OF STATE ALLAHASSEF, FLORIDA
(b)	124 Plantation Blvd Lake Worth Enter name of NEW Registered Agent and/or NEW Registered	FL_33467	,	FILED 1019 OCT 23 PH 12: 04 SECRETARY OF STATE SECRETARY SEE, FLORIDA TALLAHASSEE, FLORIDA
(b)	124 Plantation Blvd Lake Worth Enter name of NEW Registered Agent and/or NEW Registered Rolf-Michael Born	FL_33467	,	FILEU 1019 OCT 23 PH 12: 04 SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE ALLAHASSEF, FLORIDA

the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

Signature of Registered Agent