105000/01811

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
(On) October Mone wy								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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MASO N. E. P. L.



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscqlobal.com

Date: June 14, 2018

Order#: 247206/004

Re: JJC-COOK BROWN, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If ther any problems or questions with this filing, please call or

INCA.XCOA

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.	Na	ane of the limited liability company: JJC-COOK BRO	WN, LLO	2				
2. (a)	One Ajax Drive	(b)	One Aj	jax Drive			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (%)		Mailing address of	ress of limited liability company: AY BE POST OFFICE BOX)		
		North Venice, FL 34275		North Ve	North Venice, FL 34275			
		10/13/2005	_	L0500010	01811			
3.		Date of filing/registration in Florida	4.		Document num	iber		
5. ((a)	HORAN, MICHAEL A						
.). (a	(a)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept, of Stat	– e:			
		ONE AJAX DRIVE						
		Registered Office Address (MUST BE FLORIDA STREET AI	DDRESS)	_ 	-			
		-					Č	
					-	<u> </u>	î	G
(b		North Venice . FL_	34275			26 · *	**** (****	ě.
						عر بر		3 m
	b)				_	r	ھ	ű er
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office add	ress:			≱ः 2त्र:	1
						**	Ç.	• •
		1201 Hays Street			-			
		NEW Registered Office Address:						
					-			
		Tallahassee .FL	32301	·	_			
ne o gen	chai it w /we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility cor the limi	ered office npany, it is ted liabilit	e and the busine s hereby confirm y company or as	ss office	of the	registered ange(s)
		/S/ Jill Cilmi	Jill C	Jill Cilmi, Authorized Person				
λiε	gnat	ure of a member or authorized representative of a member	Printed or typed name of signee					
1. (risio obli ere fiea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change. The of Registered Agent Corporation Service Company	erforma for in C. reby co	nce of my hapter 603 afirm that	acity. I further duties, and I am 5, F.S. Or, if thi the limited liabi rby, Assistant	familia s docum lity com	r with i ent is l pany h	and accept peing filed as been

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