## ICCCCC 1514S

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





000337855360

12/12/19--01016--015 \*\*25.00

I ALDRITON

## **COVER LETTER**

TO: Registration Section Division of Corporations							
NJR Realty Company, LLC SUBJECT:							
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 m	natter to the following:						
Natalie Gomez							
Name of Person							
NJR Realty Company, LLC							
Firm/Company	<del></del>						
101 E Kennedy Blvd, Suite 2110							
Address							
Tampa, FL 33602							
City/State and Zip Code							
natalie@njrdevelopment.com							
E-mail address: (to be used for future annual	report notification)						
For further information concerning this matter, ple	ase call:						
Natalie Gomez	727 310-0834 ext 102						
Name of Person	Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following am	ount:						
■ \$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.

	ame of the limited liability company:  NJR Realty Com 460 3rd Street North, Suite A				Street North, Suite A
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(b)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	St. Petersburg, FL 333701	_		St. Peters	burg. FL 33701
	02/10/2006		1	.06000015	i148
3.	Date of filing/registration in Florida	- 4.	-		Document number
	Natalie Gomez				
5. (a)	Registered Agent and Registered Office shown on the records of t NJR Realty Company, LLC	he Flor	ida	Dept, of Stat	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRE	<u>SS)</u>		FILE 2019 DEC 12 SECRETARIASSI TALLANASSI
	Tampa	33602			Take 12
(b)	Natalie Gomez	() 67			LED LARCY OF SIGNE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	<u> 400</u>	ress:	PHILE 24
	Natalie Gomez				<del></del>
	NEW Registered Office Address:				_
	460 3rd Street North, Suite A				_
	St Petersburg, FL	33701			_
change agent was/w	imited liability company is not organized under the law c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	registe bility f the li	erec cor imi	d office an npany, it i ted liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	nataly brong	N	ata	lie Gomez	
~	dure of a member or authorized representative of a member				Printed or typed name of signee
provis the ob- to mer	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided elv reflect a change in the registered office address. I h d in writing of this change.	ve to a perfor l for in tereby	ict i ma i Ci coi	n this cap nce of my hapter 602 ufirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been

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