

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
LOC 2018121664

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000285883 3)))



H18000285883ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : MCROBERTS LAW, PLLC
Account Number : 120180000083
Phone : (239)351-2600
Fax Number : (239)351-2601

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mmcroberts @mcroberts taxlaw.com

2018 OCT -2 AM 11:06

**LLC REGISTERED AGENT CHANGE
JACK CONSTRUCTION LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

{{(118000285883 3)}}

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jack 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:

Matthew S. McRoberts

Name of Person

McRoberts Law, PLLC

Firm/Company

5625 Strand Blvd., Suite 508

Address

Naples, FL 34135

City/State and Zip Code

mmcroberts@mcrobertslaw.com

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

For further information concerning this matter, please call:

Jacques DeBlois

239

728-4291

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

INUS18 (2/14)

{{(118000285883 3)}}

((118000285883 3)))

**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: Jack Construction, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
27110 Enclave Drive
Bonita Springs, FL 34134
12/22/2006

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
27110 Enclave Drive
Bonita Springs, FL 34134
L06000121664

3. Date of filing/registration in Florida 4. Document number

5. (a) Jacques DeBlois
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1201 Hays St
Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
McRoberts Law, PLLC
NEW Registered Office Address:
5625 Strand Blvd., Suite 508
Naples, FL 34110

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.

Jacques DeBlois
Signature of a member or authorized representative of a member

Jacques DeBlois
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 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]
Signature of Registered Agent

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