## LO700030437

(Re	equestor's Name)				
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(Address)					
(Cit	ty/State/Zip/Phone	<del>= #)</del>			
☐ PICK-UP	☐ WAIT	☐ MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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## COVER LETTER

TO: Registration Section Division of Corporations	•						
SUBJECT: JP301, LLC							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	er to the following:						
Alan E Jones							
Name of Person	<del></del>						
JP301. LLC							
Firm/Company	<del></del>						
P.O. Box 189							
Address	<del></del>						
Parrish, FL 34219							
City/State and Zip Code							
alanejones1@verizon.net							
E-mail address: (to be used for future annual rep	ort notification)						
For further information concerning this matter, please	call:						
Alan E Jones	941 915-8817						
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 amour	ıt:						
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						
INHS18 (2/14)							

## 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.

i. Na	une of the limited liability company: JP301, LLC					
2. (a)		(h	)			
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	Mail	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	13400 Dickey Rd.		P.O. Box 1			
	Parrish, FL 34219	<u> </u>	Parrish, FL	34219		
	03/21/2007		L070000304	437		
3.	Date of filing/registration in Florida	4.	Do	ocument number		<del></del>
5. (a)	Alan E Jones					
	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State:	SE SE	19	
	Registered Office Address (MUST BE FLORIDA STREET	ddress (MUST BE FLORIDA STREET ADDRESS)		<b>建</b> 剂	Y V FE	<u>"ה</u>
	7623 Alister Mackenzie Dr.			SS	29	**************************************
	Sarasota F	34240		ر ند نین . س اید این . اید این	)== 	<u>in</u>
(b)	Alan E Jones			SIAFE	— رق	
(-,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office add	ress:	413		
	NEW Registered Office Address:					
	1346 Harbor Dr.					
	Sarasota Fi	1. 34239				
agent was/we the arti	mited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members of organization or the operating agreement of the	of the registiability color of the limited fi	ered office an npany, it is he ted liability co	d the business of creby confirmed to company or as other	fice of	the registered
	ure of a member or authorized representative of a member			nted or typed name of	_	
the obli to mere	ov accept the appointment as registered agent and agens of all statules relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I fin writing of this change.	ree to act e performa ed for in C hereby co	in this capacit nce of my dui hapter 605, F, nfirm that the	y. I further agree es, and I am fam S. Or, if this doc limited liability c	to co iliar w sument sompai	mply with the ith and accept is being filed ny has been
Signatur	c of Registered Agels					
		D (227	· Tallal	CT 15344		
	Division of Corporations• P.O. FILING F			, FL 32314		