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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

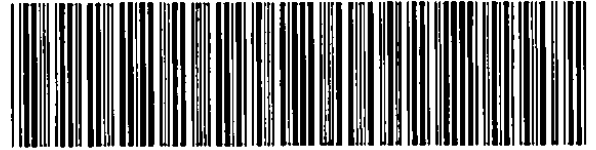
(Business Entity Name)

(Document Number)

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Jeffrey D. Lemke, CPA, CLAS, MBA, JD  
Business & Tax Consultant  
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2457  
JUNE 18, 2019

DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

RE: JBARR CAPITAL ADVISORS, LLC: REGISTERED AGENT CHANGE OF ADDRESS DOCUMENTS

Dear Sir or Madam:

Hope this letter finds you in great health and spirits!


Enclosed are the following documents:

1. Cover letter;
2. Statement of Change of Registered Agent Address;
3. Check payable to DIVISION OF CORPORATIONS for \$25.00; and,
4. New address for the LLC members. It is being filed via e-mail, however, I have enclosed a copy of the documents as well.

Please call if we need to do anything further.

Have a wonderful day!

Best regards,



Jeffrey D. Lemke, CPA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JBARR CAPITAL ADVISORS, 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:

JOSE A. BARREIROS

Name of Person

Firm/Company

6526 OLD BRICK RD 120-511

Address

WINDERMERE, FL 34786

City/State and Zip Code

BARREIROS@JBARRCAPITAL.COM

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

For further information concerning this matter, please call:

JOSE A. BARREIROS

Name of Person

at ( 954 ) 683-9018

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

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: JBARR CAPITAL ADVISORS, LLC

2. (a) JBARR CAPITAL ADVISORS, LLC  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

8254 TIBET BUTLER DR  
WINDERMERE, FL 34786

(b) JBARR CAPITAL ADVISORS, LLC  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

8254 TIBET BUTLER DR  
WINDERMERE, FL 34786

3. 10/5/2007  
Date of filing/registration in Florida

4. L07000102024  
Document number

5. (a) JOSE A. BARREIROS  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
8254 TIBET BUTLER DR  
WINDERMERE, FL 34786

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:  
6526 Old Brick Rd 120-511  
WINDERMERE, FL 34786

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.

X JOSE A. BARREIROS  
Signature of a member or authorized representative of a member

JOSE A. BARREIROS  
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.

X JOSE A. BARREIROS  
Signature of Registered Agent

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