L080000 42125

(R	equestor's Name)						
(Address)							
(Address)							
(C	ity/State/Zip/Phone #)						
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
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09/28/20--01011--006 **39.00

2020 SEP 23 PM 7: 42

15. 12/14/20

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	JOINT ENTERPRISE TECHNO	DLOGIES, LLC	
JOINIEC		Name of Limited I	Liability Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please re	turn all correspondence concerning	this matter to the	e following:
RICHIE	B. HARRIS		
	Name of Person		
JOINT E	NTERPRISE TECHNOLOGIES, LLC	;	
	Firm/Company		
4508 OA	K FAIR BLVD, SUITE 104		
	Address		
ТАМРА.	FL 33610		
	City/State and Zip Cod	e	_ _
RICHIE.	TARRIS@JOINTETECH.COM		
E-n	nail address: (to be used for future	annual report noti:	fication)
For furth	er information concerning this mat	ter, please call:	
RICHIE I	3. HARRIS	813 at (610-3418
	Name of Person		Area Code & Daytime Telephone Number
F 1	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
H	Enclosed is a check for the follow	ing amount:	
٦	□ \$25 Filing Fee	□ \$	S55 Filing Fee & Certified Copy
NHS18 (2/14) NOTE: CHECK# 2155 FO	OR \$35.00 WAS (CASHED BY FL DEPT OF STATE ON 28 SEF

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. N	Value of the limited liability company:	PRISE T	ECHNOI	LOGIES, LLC	
2. (a)	4508 OAK FAIR BLVD, SUITE 104		(b) _ 4508	BOAK FAIR BLVD), SUITE 104
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	_	s of limited liability company: **BE POST OFFICE BOX**)
	TAMPA, FL		TAM	1PA, FL	
	33610		3361	0	
	28 APR 2008		L0800	0042125	
3.	Date of filing/registration in Florida	4.		Document n	umber
5. (a	RICHIE B. HARRIS				
· (u	Registered Agent and Registered Office shown on the records of 1503 S. US HWY 301 SUITE 11	of State:	20		
	Registered Office Address (MUST BE FLORIDA STREET		020 SEP 23		
	TAMPA , F	L_33619)		23 PM
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		7:42		
	NEW Registered Office Address:		<u> </u>		
	4508 OAK FAIR BLVD., SUITE 104			<u> </u>	
	TAMPA, FI	L)		
agent was/w the ar	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members aticles of organization or the operating agreement of the Richis B. Harris atture of a member or authorized representative of a member above accept the appointment as registered agent and agreement as registered agent and agreement.	e registiability of the I imite	ered office company imited liad liability ICHIE B.	ce and the business y, it is hereby confability company or y company. HARRIS Printed or type Compacity: I further	ed name of signee
provis the ob to mei notifie	sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ged in writing of this change. Richie B. Harris	e perfor ed for in hereby	mance oj 1 Chapter confirm	t my duties, and Le r 605, F.S. Or, if i that the limited lia	am familiar with and accept this document is being filed willity company has been
Signat	ure of Registered Agent				