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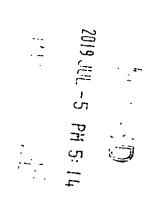
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
(21), 23.2.2,								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



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R. WHITE.
JUL 16 2019

COVER LETTER

TO:	Registration Section Division of Corporations		·				
SUBJE	PMC JACKSON SOUTH LLC						
301312		ne of Limited I	Liability Company				
Dear Si	r or Madam:						
The enc	closed Registered Agent/Registered Offi	ice Change and	d fee(s) are submitted for filing.				
Please r	return all correspondence concerning th	is matter to the	following:				
Spend	cer Angel						
	Name of Person		<u> </u>				
	Firm/Company						
11211	SW 152ND ST						
	Address						
Miami	, Florida 33157						
	City/State and Zip Code						
sange	el@ppmcr.com						
E-	mail address: (to be used for future ann	ual report noti	fication)				
For furt	her information concerning this matter.	please call:					
spence	er angel	305	255-1355				
	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		IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314				
	nclosed is a check for the following amount:						
	☑ \$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.

 N (a) 	ame of the limited liability company: PMC JACKSON SOUTH LLC	 (b) P	(E) PMC JACKSON SOUTH LLC				
2. (a)	Principal office address of limited liability compared (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	11211 SW 152nd street	11	1211 SW 152nd st	reet			
	Miami, Fl 33157	M	iami, FI 33157				
	09/09/2008	L08	3000085750				
3.	Date of filing/registration in Florida	4.	Document nu	mber			
5. (a)	Spencer Angel						
J. (a)	Registered Agent and Registered Office shown on the reco	ords of the Florida Dep	t, of State:				
	Registered Office Address (MUST BE FLORIDA ST.	REET ADDRESS)					
	80 S.W. 8TH STREET, SUITE 2000				2[
	Miami	_, _{FL} 33130		: 14	2019 JUL	• • • • • • • • • • • • • • • • • • •	
(b)	Spencer Angel				2	• '•	
	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address	:		PH	1 	
	NEW Registered Office Address:				5: 14		
	11211 SW 152nd street						
	11211 SW 1521ld Street						
	Miami	_ _{. FL_} 33157					
the changent was/w	limited liability company is not organized under ange or changes are made, the Florida street addrwill be identical. Or, in the case of a Florida limber authorized by an affirmative vote of the menicles of organization or the operating agreement	ress of the registere ited liability compa ibers of the limited of the limited liabi	ed office and the busing any, it is hereby confit liability company or lity company.	iess office o	f the re e chan	egistered ge(s)	
Ź	ature of a member or authorized representative of a member		er Angel	Lanna of signs			
			Printed or typed	_		مناول والمنادة	
provis the ob to mer	by accept the appointment as registered agent a ions of all statutes relative to the proper and con ligations of my position as registered agent as pr ely reflect a change in the registered office addr ey in writing of this change	npleie performance rovided for in Chap	e of my duties, and La oter 605, F.SOr, if th	m familiar v his documen	vith ar t is be	id accept ing filed	

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

Signature of Registered Agent