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(R	equestor's Name)							
(A	ddress)							
(Address)								
		10						
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(B	usiness Entity Name	<del>)</del>						
(D	ocument Number)							
Certified Copies	Certificates of	of Status						
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Special Instructions to Filing Officer:								
		:						

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SECRETARY OF STATE

APR 0 3 2014 C. CARROTHERS



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

llockar2@cscinfo.com

Date: March 27, 2014

Order#: 064908/061

Re: JIMMY JAZZ OF UNIVERSITY MALL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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.	Na	me of the limited liability company: JIMMY JAZZ OF	UNIVE	RSITY MAL	L, LLC			
2	(a)	2200 E. Fowler Avenue, #321	(b)	85 Metro	oway, Room	1097		
-	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (0.		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
		Tampa, FL 33612	<del></del>					
			_	Secaucus	, NJ 07094			
		03/16/2009		L09000025	5577			
3.		Date of filing/registration in Florida	4.	]	Document ni	umber		
5.	(a)	Business Filings Incorporated						
•	(-)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State:				
		515 E. Park Avenue						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		•			
		Tallahassee ,FL	32301			ECKE	14 MAR	ce sq L
	(b)	Corporation Service Company				#SSEE	≈3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:			PM 3:	1
		1201 Hays Street				82	3: 00	
		NEW Registered Office Address:				A	Ü	
				<del></del>				
		<u>Tallahassee</u> , FL	32301					
the age	cha ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of to will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility con the limi imited li	ered office npany, it is ted liability ability comp	and the busing hereby conficompany or pany.	ness officirmed that as other	ce of t at the	he registered change(s)
	ignat	ure of a member or authorized representative of a member	Dona		thorized Pers Printed or types		sionee	
I h pro the to i not	erel ovisio obli nere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	e to act performa for in C ereby co				-	nply with the th and accept s being filed v has been
Sig	natur	e of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirt	y, Asst. VP	•		

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