## 6100000 57521

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
J DENNIS					
MAY 1 5 2023					

Office Use Only



100403672101

00.72/23--01011--015 \*\*25.70

SECRETARY OF STATION .

## **COVER LETTER**

TO: Registration Section Division of Corporations	•			
CJBROWN LLC SUBJECT:				
Name of L	Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
Carol Brown				
Name of Person				
Firm/Company				
3906 Spyglass Hill Rd.				
Address				
Sarasota, FL 34238				
City/State and Zip Code	<del></del>			
carolcbbrown@gmail.com				
E-mail address: (to be used for future annual re	port notification)			
For further information concerning this matter, please	call:			
Carol Brown at (	941 525-6847			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amou	int:			
■ \$25 Filing Fee	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. N	ame of the limited liability company:				
2. (a)	3906 Spyglass Hill Rd.		(b	3906 Sp	yglass Hill Rd.
()	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)
	Sarasota FL 34238	<del></del>		Sarasota	FL 34238
	May 27, 2010		]	.1000005	7524
3.	Date of filing/registration in Florida	4.	-		Document number
5. (a	James L. Brown				
(-	Registered Agent and Registered Office shown on the records of			·	ate:
	Registered Office Address (MUST BE FLORIDA STREET) 3906 Spyglass Hill Rd.	4DDR	ESS		
	Sarasota	34238	3		
(b)	Carol W, Brown  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
	3906 Spyglass Hill Rd.				
	NEW Registered Office Address:				
	Sarasota, FL	34238	3		_
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist bility of the limite	ere cor limi d li	1 office a npany, it ted liabili	is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
Signa	nture of a member or authorized representative of a member	_			Printed or typed name of signee
provis the ob to <b>m</b> er	eby accept the appointment as registered agent and agraions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change	ee to c perfoi I for i pereby	act i rma n Ci r coi	in this cap nce of my hapter 60 nfirm thai	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been