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(Requestor's Name)					
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH F $\stackrel{\wedge}{\Rightarrow}$ $\stackrel{\wedge}{\approx}$ Emitted Liability Company

Pursuant to the provisions of sections 608.416 or 608.508, 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. Nar	ne of the limited liability company: J&E HOLDIN	GS OF SARASOTA, LLC					
2. (a)	Principal office address of limited liability co (Note: MUST BE STREET ADDRESS)	ompany: 1001 Annie Laurie Lane Sarasota, Florida 34240					
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same as Above			<u> </u>		
04/28/201		L11000050455					
3. Dat	e of filing/registration in Florida	4. Document number					
5. (a)	Registered Agent and Registered Office show	wn on the records of the Florida D	ept. of St				
	Registered Agent:	Jeffrey S Russell	17 (1) (1)	2014			
Registered Office Address:	240 South Pineapple Ave., 9th Floor	79 × 3 33 - 3-	<u></u>				
		Sarasota, Florida 34236	7. 1 (1 m) (2	77 221"		
(h)	Enter many of NJEW Darles and American definition	NEW Decident Office Aller	. (T)	70	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(D)	Enter name of <u>NEW Registered Agent</u> and/	or NEW Registered Utince addre	<u>ss</u> :	15	1		
	NEW Registered Agent:	Jan W. Pitchford	Çyrı)	<u>‡</u>			
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	240 S Pineapple Avenue, 10th FL					
		Sarasota	Sarasota ,FL 34236				
confirmand the liability the me the ope	imited liability company is not organized undined that after the change or changes are made business office of the registered agent will be company, it is hereby confirmed that the chambers of the limited liability company or as o crating agreement of the limited liability company or as of a member or authorized representative of a member	, the Florida street address of the re e identical. Or, in the case of a Florange(s) was/were authorized by an otherwise provided in the articles o	egistered orida limi affirmati	l office ited ive vote	of ·		
	ERRI E BEILER						
	or typed name of signee						
	by accept the appointment as registered agent with the provisions of all statutes relative to m familiar with and accept the obligations of r 608, F.S. On if this document is being filed s, I hereby confirm that the limited liability co	t and agree to act in this capacity. the proper and complete performs my position as registered agent a to merely reflect a change in the ompany has been notified in writin	I furthei ince of m s provide registere g of this	r agree ly duties ed for in ed office change	to 5, !		
Signatuf	Division of Corporations, P.O. I	Box 6327, Tallahassee, FL 32314	ı				
FILING FEE: \$25.00							