

2/24/2015 16:05:53 From: To: 8806176383

Division of Corporations

L11000057693
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE
JANKOWICH CONSULTING, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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2/24/2015 16:05:53 From: To: 8506176383

(2/3)

COVER LETTER**TO:** Registration Section
Division of Corporations**SUBJECT:** JANKOWICH CONSULTING, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edward M. Jankowich

Name of Person

Jankowich Consulting, LLC

Firm/Company

5342 Passing Pine Lane

Address

Zephyrhills, FL 33541

City/State and Zip Code

emj@iccc.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at ()

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301**MAILING ADDRESS:**Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

2/24/2015 16:05:53 From: To: 8506176383

(3/3)

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. Name of the limited liability company: Jankowich Consulting, LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
5342 Passing Pine Lane
Zephyrhills, FL 33541
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
5342 Passing Pine Lane
Zephyrhills, FL 33541
3. Date of filing/registration in Florida
05/16/2011
4. Document number
L11000057693
5. (a) Powley White Boggs, P.A.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
c/o Ian C. Larson, Esq., 501 East Kennedy Blvd, Ste 1700
Tampa, FL 33602
- (b) CT Corporation System
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Edward M. Jankowich
Signature of a member or authorized representative of a member.

Edward M. Jankowich
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent or provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Margaret E. Ro
Signature of Registered Agent

MARGARET E. RO
Special Assistant Sec

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

JNH518 (2/14)

PL015 - (03/04/2014) When Known Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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