L110000081028

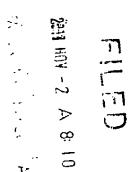
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Dusiness Littly Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



600320303676

11/02/18--01014--001 **100.00



COVER LETTER

TO: Registration Section Division of Corporations			
JMJ Villas, LLC			
	ne of Limited Li	ability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing	<u>'</u> .
Please return all correspondence concerning th	nis matter to the	following:	
Chad Dewald			
Name of Person	 -	_	١ أ
Franklin Street Mangement Services			٠. د
Firm/Company			· > .;
600 N Westshore Blvd Suite 600			0
Address			
Tampa, FL 33609			
City/State and Zip Code			
cdewald@franklinstreetrs.com			
E-mail address: (to be used for future and	nual report noti	lication)	
For further information concerning this matter	r, please call:		
Chad Dewald	813 at (839-7300 ext 309	
Name of Person	\	Area Code & Daytime Tele	ephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.e	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 illahassee, Florida 32314	
Enclosed is a check for the following	g amount:		
☑ \$25 Filing Fee		55 Filing Fee & Certified Cor	١٧

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

rioriaa		c	
1. Na	me of the limited liability company: JMJ Villas, LL	<u> </u>	
2 (4)	Jose M Jimenez	(b)	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	N	failing address of limited liability company: (Note: MAY BE POST OFFICE ROX)
	10481 Tatas Place		
	Escondido, CA 92026		
	8/22/2011	L1100008	
3.	Date of filing/registration in Florida	4.	Document number
	Cockey, Preston OJR		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			~ ~ ~
	110 E Madison St Suite 204		
	Tampa, FI	33602	
(b)	Chad Dewald Vice President - Multifamily M	ianagement	ī. O
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	Franklin Street Management Services		-
	NEW Registered Office Address:		
	600 N Westshore Blvd Suite 600		
	Tampa, FI	33609	_
the ch agent	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	iability company, it of the limited liabili	is hereby confirmed that the change(s) ty company or as otherwise provided in
- Sim	ature of o member or authorized representative of a member		11
I here provis the ob	eby accept the appointment as registered agent and agents of all statutes relative to the proper and completions of my position as registered agent as providing the reference of the change in the registered office address, and in writing of this change.	gree to act in this ca e performance of mi ed for in Chapter of I hereby confirm tha	pacity. I further agree to comply with the oduties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
Signa	ture of Registered Agent		
∑, Fitte		- coom (0.11-1-	nerga F1 37314