K11000088343

(Requestor's Name)
(Address)
,
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(Oity/Otate/Lipit Hone #)
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of 3/31/2022

COVER LETTER

	Registration Section Division of Corporations				
171	The of Corporations				
SUBJECT	: English- El Enterprises LLC				
	Name of I	limited Liability	Company		
Dear Sir or	r Madam:				
The enclos	ed Registered Agent/Registered Office Cl	ange and fee(s)	are submitted for filing.		
Please retu	irn all correspondence concerning this mat	ter to the follow	ing:		
	Barbara English	<u> </u>			
	Name of Person				
	English- El Enterprises LLC				
	Firm/Company				
1431	Riverplace Blvd. #2310				
	Address				
J	acksonville FL 32207				
	City/State and Zip Code				
E-m	be@eeenterprises.biz ail address: (to be used for future annual r	eport notificatio	n)		
For furthe	er information concerning this matter, plea	se call:			
Barb	·	(_904)_	755-2554		
	Name of Person	Ar	ca Code & Daytime Telephone Number		
	Mailing Address:		reet Address:		
	Registration Section	R	egistration Section		
Γ.	Division of Corporations	D	ivision of Corporations		
F	P.O. Box 6327		he Centre of Tallahassee 415 N. Monroe Street, Suite 810		
7	Fallahassee, FL 32314		allahassee, FL 32303		
I	Enclosed is a check for the following am	ount:			
	S25 Filing Fee		iling Fee & Certified Copy		

INHS18 (2/14)

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.

. (a)	31 West Adams Street, Suite 205	(b)	
, , ,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville FL 32202		Jacksonville FL 32202
	August 1 2011		L11000088343
	Date of filing/registration in Florida	4.	Document number
	C. E. English-El		
(a)	Registered Agent and Registered Office shown on the records of	f the Florida De	pt. of State:
	31 West Adams Street, Suite 205		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS _I	
			202 SE
	Jacksonville , F	I. <u>32202</u>	TALLATA
, La	Barbara English		Cr · Pr
(b)	Enter name of NEW Registered Agent and/or NEW Registers	ed Office addre	
	1431 Riverplace Blvd. #2310		
	NEW Registered Office Address:		
	Jacksonville, }	TL 32207	
chang agent was/v the ar	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the nature of a member or authorized representative of a member selection to the proper and completely accept the appointment as registered agent and accept the appointment as registered agent and completely accept the appointment as registered agent and accept the appointment as registered agent and accept the accept the appointment as registered agent and accept the appointment as registered agent and accept the appointment as registered agent and accept the accept t	liability com s of the limite ne limited lial	pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. Barbara English Pres and CEO Printed or typed name of signee
ner provi the o	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi rely reflect a change in the registered office address.	ie performan ded for in Ch I hereby con	we of my duties, and 1 am familiar with this acce apter 605, F.S. Or, if this document is being file firm that the limited liability company has been