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(Re	questor's Name)				
(Ad	idress)				
(Ād	dress)				
(Cit	ty/State/Zip/Phon	e #)			
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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations	
Jackie Lynn's LLC	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Darren Frankenberger	
Name of Person	
Jackie Lynn's LLC	
Firm/Company	
21323 S. Kings Mill LN	
Address	
Kingwood, TX 77339	
City/State and Zip Code	
FrankenbergerLLC@gmail.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
	832) 543-1161
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassaa Florida 32314
Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
\$25 Filing Fee	☐ \$55 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.

Name of the limited liability company:	ackie Lynn's, L	LC			
21323 S. Kings Mill Ln		(b)	SAME	Same	
Principal office address of limited liabil (Note: MUST BE STREET AD)		· /	Mailing address of limi (Note: MAY BE PO		
Kingwood, TX 77339		_			
01/19/2012		L12	.000009502		
Date of filing/registration in F	lorida	4.	Document number	r	
(a) Trantalis, Dean JESQ					
Registered Agent and Registered Office shown	on the records of the	Florida Dep	t. of State:		
2255 Wilton Dr.					
Registered Office Address (MUST BE FLO	ORIDA STREET ADL	RESS)			
Wilton Manor	, _{FL} 33	305		2019	
	, rL			_ ت	
b) Margaret Dunne				- - -	
Enter name of NEW Registered Agent and/or	NEW Registered Off	ice address		CJ CJ	
4410 Ne 17 Terr				- i Mi 12: 27	
		_		2: 2	
NEW Registered Office Address:				7	
Oakland Park	22	224			
	, FL_33		<u></u>		
the limited liability company is not organize e change or changes are made, the Florida steems will be identical. Or, in the case of a Florida	ed under the laws or	of the State registere	d office and the business	office of the reg	
/were authorized by an affirmative vote of	the members of th	ne limited	liability company or as o	therwise provided	
articles of organization or the operating ag	reement of the lim		rrankenberger		
gnature of a member of authorized representative of	a member	Danen	Printed or typed nam	e of signee	
creby accept the appointment as registered visions of all statutes relative to the proper obligations of my position as registered agreely reflect a change in the registered officed in writing of this change.	l agent and agree r and complete per gent as provided fo fice address, I her	to act in the formance or in Chap eby confir	 his canacity. I further ag	ree to comply with	
Anure of Registered Agent					