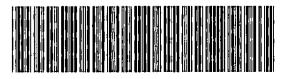
# L12000031431

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

Office Use Only



100369203031

37 12.31-+010 T-+019 \*-TF.50

SELL VENERAL SELL SELL VENERAL SELL VENERAL

JUL > 0 2021

C Kinsey

## JAY F. COOK, P.L.

July 9, 2021

#### **DELIVERED BY FEDERAL EXPRESS**

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

#### Ladies and Gentlemen:

Enclosed for filing are 3 Statements of Change of Registered Office or Registered Agent or Both for Limited Liability Company – 1 for IBRHSF I, LLC (L11000096326). 1 for JAN/IAN TX LLC (I12000031431), and 1 for IBRJJA 14, LLC (L14000144907). A check in the amount of \$75.00 to cover the filing fee of \$25.00 on each of the 3 Statements is also enclosed.

If you have any questions or need anything further, please let me know.

Thank you.

Enclosures

#### **COVER LETTER**

TO: Registration Section

Divi	sion of Corporations						
SUBJECT:	JAN/IAN TX LLC						
SUBJECT	Name of Limited Liability Company						
Dear Sir or N	Madam:						
The enclosed	I Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.					
Please return	all correspondence concerning this matte	er to the following:					
lan B. Russell	ľ						
	Name of Person	<del></del>					
JAN/IAN TX	LLC						
	Firm/Company						
16437 Carrar	a Way, Unit 102						
	Address	<del></del>					
Naples, FL 34	4110						
	City/State and Zip Code						
irussellco@cc	omeast.net						
E-mail	address: (to be used for future annual rep	ort notification)					
For further in	nformation concerning this matter, please	call:					
Jay F. Cook		963-3061					
	Name of Person	Area Code & Daytime Telephone Number					
Regi Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 phassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Encl	osed is a check for the following amour	ıt:					
■ \$2	25 Filing Fee	S55 Filing Fee & Certified Copy					
1NHS18 (2/14)	1						

### 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.

	ame of the limited liability company:   JAN/IAN TX L			•		
2. (a) _	Principal office address of limited liability company:		(b)	Mailing address of limited lia		
	( <u>Note: MUST BE STREET ADDRESS</u> )			(Note: MAY BE POST O	FFICE BO	<u>()X</u> )
	16437 Carrara Way. Unit 102	arrara Way, Unit 102	a Way, Unit 102			
	Naples, FL 34110		Naples.	FL 34110		
	March 2, 2012		L120000	31431		
3.	Date of filing/registration in Florida	— 4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records o	Cibe Flor	ida Dent, of S	State:		
	Law Offices of Jay F. Cook, P.L.	1 1112 7 101	ida izept. in c	-	202	
		. 10001		<u> </u>	2021 . 12	22.52.
	Registered Office Address (MUST BE FLORIDA STREET) 5150 N. Tamiami Trail, Suite 201	ADDKE	<u>33)</u>	-	<u>-</u>	uma.
					2	:
	Naples	L		•	7	
	· · · · · · · · · · · · · · · · · · ·			<del></del>	7.	
(b)					<i>1</i> − 5\	
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:		٠.	
	lan B. Russell					
	NEW Registered Office Address:		<u> </u>			
	16437 Carrara Way, Unit 102					
	Naples F	. 34110 L				
hange gent v vas/we	imited liability company is not organized under the la or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	registe ability of the li limited	ered office company, i imited liabi I liability c	and the business office of t t is hereby confirmed that lity company or as otherw ompany.	he regis the chan	tered ge(s)
Signat	ture of a member or authorized representative of a member		n B. Russell			
			ar tar at t	Printed or typed name of sig		lali eli
rovisie he obli o mere	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I I'in writing of this change.	nerfor.	mance of m	y duties, and Lam Tamilian	with an	d accept

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 F1LING FEE: \$25.00

Signature of Registered Agent