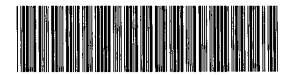
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(Requestor's Name)				
(Address)				
(National)				
(Address)				
(City	//State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
. (Bus	siness Entity Nan	ne)		
(Business Emily Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECONDANION STATE
FAIL AND SSEE FLORIDA

J. HARRIE

COVER LETTER

	Registration Section Division of Corporations					
SUBJECT	Jetty Asset Management PLLC					
SCHOLC	Name of Limited Liability Company					
Dear Sir o	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:						
Kelly R I	Brantley					
	Name of Person					
Jetty As	set Management					
	Firm/Company					
303 Tan	niami Trail South Ste E					
	Address					
Nokomis	s, FL 34275					
	City/State and Zip Code					
kellybra	ntley@jettyassetmgt.com					
E-ma	ail address: (to be used for future annual re	eport notification)				
For furthe	r information concerning this matter, pleas	e call:				
Kelly Bra	antley at	404 384-8380				
	Name of Person	Area Code & Daytime Telephone Number				
Re Di Cl 26	egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Eı	Enclosed is a check for the following amount:					
Ø	\$25 Filing Fee	☐ \$55 Filing 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.

1. Na	ame of the limited liability company:	Management, P	ric
2. (a)	303 Tamiami Trail S. Ste E, Nokomis, FL 34	27 (b) same	
_, ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	06/11/2015 3/23/12 Date of filing/registration in Florida United States Corp Agent Inc		200040557 Document number
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET) 13302 Winding Ct Ste A	ADDRESS)	_
	Tampa	L 33612	
(b)	Kelly Brantley		15 JUN
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address:	JUN 15
	3216 Casey Key Rd		
	NEW Registered Office Address:		9: 32 STATE LORIDA
	Nokomis F	L_34275	
the cha agent was/w	imited liability company is not organized under the launge or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered offi iability company, it of the limited liabil e limited liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
Sign	ture of a member or authorized representative of a member	Kelly Brantl	Printed or typed name of signee
I here provis the ob to mer notific	by accept the appointment as registered agent and assons of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to act in this ca e performance of m ed for in Chapter 60 hereby confirm tha	macity. I further agree to comply with the
/	Division of Corporations • P.O.	Box 6327• Tallah	assee, FL 32314

FILING FEE: \$25.00

INHS18 (2/14)