

L12000059305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

*W*

JUL 15 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 18, 2013

MARTHA NAJIB  
JADA MICHAELS, LLC  
4521 CLEARWATER HARBOR DRIVE N  
LARGO, FL 33770

SUBJECT: JADA MICHAELS, LLC  
Ref. Number: L12000059305

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

We have received your document for JADA MICHAELS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 913A00015265

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jada Michaels, LLC  
Name of Limited Liability Company

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:

Martha Najib  
Name of Person

Jada Michaels, LLC  
Firm/Company

4521 Clearwater Harbor Drive N  
Address

Largo, Florida 33770  
City/State and Zip Code

jada@jadamichaels.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martha Najib at (312) 515-1437  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: Jada Michaels, LLC
2. (a) Principal office address of limited liability company: 4521 Clearwater Harbor Drive N  
(Note: MUST BE STREET ADDRESS) Largo, Florida 33770
- (b) Mailing address of limited liability company: 4521 Clearwater Harbor Drive N  
(Note: MAY BE POST OFFICE BOX) Largo, Florida 33770
- May 2, 2012
3. Date of filing/registration in Florida
- L12000059305
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

The Company Corporation

Registered Office Address:

1201 Hays street  
Tallahassee, Florida 32301  
800-342-8086

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Martha Najib

NEW Registered Office Address:

4521 Clearwater Harbor Dr N

(MUST BE FLORIDA STREET ADDRESS)

Largo, FL 33770

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Martha Najib

Signature of a member or authorized representative of a member

Martha Najib

Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Martha Najib

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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MAY 12 AM 8:53  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE