

L12000132698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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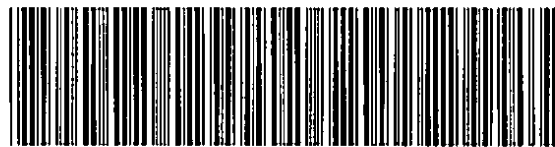
(Business Entity Name)

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TALLAHASSEE, FL

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D. BRUCE
SEP 02 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rosalind Jeffery's Investments "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:

Rosalind Crocker

Name of Person

Rosalind Jeffery's Investments "LLC"

Firm/Company

10780 SW 165th St.

Address

Miami/Florida/33157

City/State and Zip Code

rosalinddixon29@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosalind Crocker

786 619-5164
at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

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

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 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.


Rosalind Jeffery's Investments "LLC"	
1. Name of the limited liability company: _____	_____
2. (a) Rosalind Jeffery's Investments "LLC"	(b) Rosalind Jeffery's Investments "LLC"
Principal office address of limited liability company: <u>(Note: MUST BE STREET ADDRESS)</u>	Mailing address of limited liability company: <u>(Note: MAY BE POST OFFICE BOX)</u>
10780 SW 165th St.	10780 SW 165th St.
Miami, FL 33157	Miami, FL 33157
10/17/2012	L12000132698
3. Date of filing/registration in Florida	4. Document number
NRAI Services, INC.	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: NRAI Services, INC.	
Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>	
1200 South Pine Island Road	
Plantation, FL 33324	
(b) Rosalind Crocker	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
Rosalind Crocker	
<u>NEW Registered Office Address</u> :	
10780 SW 165th St	
Miami, FL 33157	

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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.

 _____ Signature of a member or authorized representative of a member	Rosalind Crocker _____ Printed or typed name of signee
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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 605, 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.



Signature of Registered Agent