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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MSJB Diversified, 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:

Maryanne Blandford

Name of Person

MSJB Diversified, LLC

Firm/Company

1621 Beach Parkway #104

Address

Cape Coral, Florida 33904

City/State and Zip Code

mblandford11@comcast.net

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

For further information concerning this matter, please call:

Maryanne Blandford

_{at} 239

471-2430

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

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.

ugei	in, or voin, in the state of Fiorial.		
1. N	Name of the limited liability company: MSJB Diversified, LLC	,	
2. ((a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	y: 1621 Beach Parkway #104 Cape Coral, Florida 33904	
((b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same	21/3 AUG
_			SS 5
	Date of filing/registration in Florida	4. Document number	
5.	(a) Registered Agent and Registered Office shown on	the records of the Florida	a Dept. of State:
	Registered Agent:	Corporation Service Company	<u> </u>
	Registered Office Address:	1201 Hays Street Tallahassee, Florida 32301	
((b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	W Registered Office ad Maryanne Blandford	dress:
(dress:
If the contant liab the the	NEW Registered Agent: NEW Registered Office Address:	Maryanne Blandford 1621 Beach Parkway #104 Cape Coral, Florida 33904 laws of the State of Flori Florida street address of the stical. Or, in the case of a	,FLda, it is hereby ne registered office

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