L13000025250

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



100254398691

12/06/13--01013--003 **25.00

2013 DEC -6 PM 3: 1°
SECRETARY OF STATE A

CEC - 9 2013

T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations J & C INTERNATIONAL 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: ANTONIO E. REGOJO Name of Person REGOJO LAW, P.A. Firm/Company 3550 BISCAYNE BLVD. SUITE 507 Address MIAMI, FLORIDA 33137 City/State and Zip Code For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 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.

1. Name of the limited liability company: J& C INTERNATION	AL LLC	
2. (a) Principal office address of limited liability company (Note; MUST BE STREET ADDRESS)	7: 13601 SW 143rd CT. #104 MIAMI, FLORIDA 33186	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	13601 SW 143rd CT. #104 MIAMI, FLORIDA 33186	
02/18/2013	L13000025250	
3. Date of filing/registration in Florida	4. Document number	20
5. (a) Registered Agent and Registered Office shown on Registered Agent:	the records of the Florida Pr	ot. State.
Registered Office Address:	11077 BISCAYNE BLVD. SUITE.408 MIAMI, FLORIDA 33161	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address	on 3:
NEW Registered Agent:	ANTONIO REGOJO	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3550 BISCAYNE BLVD. SUITE 507	
	MIAMI	_,FL <u>33137</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the regical. Or, in the case of a Flori was/were authorized by an a	ristered office ida limited ffirmative vote of
Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	gree to act in this capacity. I oper and complete performan sition as registered agent as p rely reflect a change in the re y has been notified in writing	further agree to ce of my duties, provided for in gistered office of this change.

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

Signature of Registered Agent