

L13000062964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(office)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JBF Properties, 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:

Arcelia Finkelberg

\_\_\_\_\_  
Name of Person

JBF Properties LLC

\_\_\_\_\_  
Firm/Company

3142 Glenridge Dr

\_\_\_\_\_  
Address

Palm Harbor, FL 34685

\_\_\_\_\_  
City/State and Zip Code

joe@jbf.bz

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

For further information concerning this matter, please call:

Arcelia Finkelberg

at ( 847 )

6363005

\_\_\_\_\_  
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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JAN 24 2018  
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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.*

1. Name of the limited liability company: JBF Properties, LLC
2. (a) 3142 Glenridge Dr Palm Harbor FL 34685  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)
- (b) 3142 Glenridge Dr Palm Harbor FL 34685  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

3. 04/30/2013 Date of filing/registration in Florida
4. L13000062964 Document number

5. (a) Arcelia Finkelberg  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
3142 Glenridge Dr. Palm Harbor, FL 34685  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

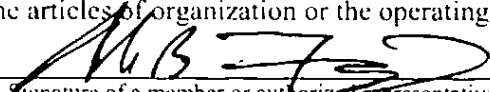
- (b) 36181 East Lake Rd. #255 Palm Harbor, FL 34685  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:  
36181 East Lake Road #255

Harbor, FL 34685

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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

Joseph Finkelberg  
Printed or typed name of signee

*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