## L130000711/2

(R	equestor's Name)						
(Address)							
(A	ddress)						
(C	ity/State/Zip/Phone #)	·					
PICK-UP	☐ WAIT	MAIL					
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100R 5/8/15

## **COVER LETTER**

Division of Corporations				
JAXR2 LLC SUBJECT:				
	e of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning thi	s matter to the following:			
Jason R. Green				
Name of Person				
JAXR2 LLC				
Firm/Company				
13075 Lanier Road				
Address				
Jacksonville, Florida 32226	•			
City/State and Zip Code	<del></del>			
jrgtile@aol.com				
E-mail address: (to be used for future annual	ual report notification)			
For further information concerning this matter,	please call:			
Jason R. Green	904 8136845			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the following	amount:			
<b>△</b> \$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 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.	Na	me of the limited liability company:						
2. (a		JAXR2 LLC	/1	b)	JAXR2 L	LC		
2. (	·) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ ('	υ).	N		s of limited liability	
		1509 Faye Rd			13075 La	anier Road		<u>4 4011</u> /
		Jacksonville, Florida 32218	<u> </u>	-	Jackson	ville, Florid	da 32226	
		5-13-13		Ĺ,	1300007	1112		
3.		Date of filing/registration in Florida	4.	_		Document r	number	<del>.</del>
5. (	(a)	Jason R. Green						
J. (	<i>u)</i>	Registered Agent and Registered Office shown on the records of the	he Florid	la D	Dept. of State:	: 		
		Jason R. Green						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES:	S)				E E
		13075 Lanier Road					Sign	T B
		Jacksonville	32226	3			in the	FILED 2: 10
(1	b) .	SAME - NO CHANGE  Enter name of NEW Registered Agent and/or NEW Registered (	Office ad	ddr	ess:			
		NEW Registered Office Address:	<del>.</del>					
		1509 Faye Road						
		Jacksonville, FL_	32218	3				
the cagen was/the a	t we write	mited liability company is not organized under the law need or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of the organization or the operating agreement of the law of a member of all statutes relative to the proper and complete particular of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete particular of my position as registered office address, I have the proper and complete particular of the position of the registered office address, I have the proper and complete particular of the proper and particular of the pr	the reginality confirmated  Jase to accept the ac	iste om nit lia SO ct in ch	ered office pany, it is ed liability com n R. Green this capa ace of my a paper 605, firm that the	and the bus hereby con company of pany. en Printed or typ	siness office of firmed that the or as otherwise produced name of signee the confirmed to confirm the signes are to confirm the signes to confirm the signest to confir	the registered change(s) provided in
Sign	atur	e of Registered Agent	~ '	, _				

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