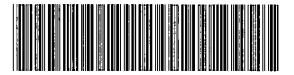
43000075939

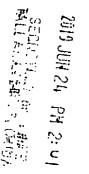
(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



200330853802

06/24/19--01035--016 **25.00



Y SULKER JUL 0 8 2019

COVER LETTER

. . .

TO:	Registration Section Division of Corporations						
SUBJI	SUBJECT: PNEUMA PROPERTY INVESTMENT, LLC Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	sclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning thi	s matter to the following:					
ENO	CK EDOUARD						
	Name of Person						
PNE	JMA PROPERTY INVESTMENT,	LLC					
	Firm/Company						
116 9	SMOKEY HILL AVE						
	Address	· · · · · · · · · · · · · · · · · · ·					
RUS	KIN, FL 33570						
	City/State and Zip Code						
LPRE	EDELUS87@GMAIL.COM						
E	-mail address: (to be used for future annu	ual report notification)					
For fur	ther information concerning this matter,	please call:					
LOVE	PREDELUS	561-512-4331					
	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					
INHST	8 (2/14)						

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. N	ame of the limited liability company: PNEUMA PR	ROPER	RTY INVE	STMENT, LLC
2. (a)			(b)	
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(5)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	116 SMOKEY HILL AVE		116 SM	OKEY HILL AVE
	RUSKIN, FL		RUSKII	N, FL
	33570		33570	
3.	Date of filing/registration in Florida	— 4.	-	Document number
5. (a	ENOCK C. EDOUARD			
J. (a	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET 116 SMOKEY HILL AVE	ADDRES	55)	_
	RUSKIN , FI	33570)	2019 SEC TALL
(b)	LOVE PREDELUS			2019 JUN 24 SECUM TO A SECUM TO A
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:	
	268 LAKE MONTEREY CIR			
	NEW Registered Office Address:	<u> </u>	-	
	BOYNTON BEACH , FI	33426	 S	_
agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ws of th f the reg iability of of the li	e State of Flistered office company, it mited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
				Printed or typed name of signee
provis the ob to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I d in writing of this change.	ree to ac e perform ed for in hereby c	ct in this cap nance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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