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COVER LETTER

TO: Registration Section Division of Corporations	
JPSS LLC SUBJECT:	
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Louise Jaffe	
Name of Person	
Midgard Management, Inc.	
Firm/Company	
1475 W. Cypress Creek Road, Suite 202	
Address	
Fort Lauderdale, FL. 33309	
City/State and Zip Code	
LJaffe@midgardmanagement.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	, please call:
Louise Jaffe	954 640.0233 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	g amount:
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy
INHS18 (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.

a) .	1475 W. Cypress Creek Road	(b	Same	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suits 202	_ `	Ma	iling address of limited liability company: Note: MAY BE POST OFFICE BON)
	Suite 202			
	Fort Lauderdale, FL. 33309			
	06.10.2013		L1300008379	5
· ~ \	Date of filing/registration in Florida Cliff Hertz	4.	D	ocument number
(a)	Registered Agent and Registered Office shown on the records of the Florida Dept, of State Nelson Mullins Broad and Cassel			
	Registered Office Address (MUST BE FLORIDA STREET) One N. Clematis St. #500	ADDRESS	!	
	West Palm Beach , FL	33401		15.5 10.0
b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad		
	360 South Rosemary	Office ag	iress.	Ma oct 1
	NEW Registered Office Address:			
	Suite 1410			
	West Palm Beach, FL	33401		
ige it w /we	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization of the operating agreement of the layer of a member or authorized registentative of a member	registere ability co of the lim	d office and t npany, it is h ted liability c ability compa	he business office of the registered ereby confirmed that the change(s company or as otherwise provided
	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I l	ee to act	in this capaci	iv I further agree to contaly with

Signature of Registered Agent