213000143876

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
r «					
SA CANAL CONTRACT CON					
ANIAS SEE, TO AN					
PAR LEGAL					



800302013808

08/15/17--01001--001 **1075.00

FILED IN AUG 28 P III AUG

D RRUCE AUG 2 8 2017

U



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2017

JB ROTH ROTH LAW FIRM PL 6100 GREENLAND RD., SUITE 604 JACKSONVILLE, FL 32258

SUBJECT: CONVINCIFY LLC Ref. Number: L13000143876

We have received your document for CONVINCIFY LLC and your check(s) totaling \$1075.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document number listed on the form does not match the document numberon our records. Please see printout.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist III

Letter Number: 817A000 6800 5

SLUCCING FALLAHASS

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations				
CONVINCIFY LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offic	ce Change :	and fee(s) are submitted for fili	ng.	
Please return all correspondence concerning this	s matter to	the following:		
JB ROTH				
Name of Person				
ROTH LAW FIRM PL			2017 TALL	
Firm/Company			2017 AUG 28 SECRETAKY ALLAHASSE	
6100 GREENLAND RD., SUITE 604			m _e	
Address			7 T E	
JACKSONVILLE, FL 32258			प्राप्ति । १५५३, १५५३,	
City/State and Zip Code				
JB@ROTHLAWFIRM.NET				
E-mail address: (to be used for future annu	ial report n	otification)		
For further information concerning this matter,	please call:			
JB ROTH	904	ຸ 595-7900		
Name of Person	_ ar (Area Code & Daytime Te	elephone 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 Co	ODV	

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

1.	Name of the limited liability company: CONVINCIFY	Y LLC			
2. (a	2008 RIVERSIDE AVE	(b) 2008 R	(h) 2008 RIVERSIDE AVE		
2. (2	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SUITE 302	SUITE	302		
	JACKSONVILLE, FL 32204	JACKS	ONVILLE, FL 32204		
	10/11/2013	±1000 0	373830= L13000143816		
3.	Date of filing/registration in Florida , ROTH LAW FIRM PL	4.	Document number		
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 234 CANAL BLVD					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE 2 PONTE VEDRA BEACH EL 32082				
	PONTE VEDRA BEACH FL	32082	AHAS		
(b	, ROTH LAW FIRM PL		FILED #UNIG 28 P IF INTELLANDESSEE, FLORIDA		
Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	6100 GREENLAND ROAD		NOA HE		
	NEW Registered Office Address:	<u></u>	_		
	SUITE 604		_		
	JACKSONVILLE FL	32258	_		
the c agen was/	elimited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lin were authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the	the registered office ability company, it of the limited liabili	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in		
		JEAN B RO	TH, AUTH. REPRESENTATIVE		
Sig	rature of a member or authorized representative of a member		Printed or typed name of signee		
provi the o to me	weby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete bligations of my position as registered agent as provide welly reflect a change in the registered office address, I died in writing of this change.	ree to act in this cap performance of my d for in Chapter 60, hereby 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		
Signa	ture of Registered Agent				