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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BILLY BOY LLC	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Michael Jenner	
Name of Person	
EMJAY GROUP LLC	
Firm/Company	
1401 Brickell Ave, Ste 320	
Address	
Miami, FL 33131	
City/State and Zip Code	
mike@emjay.group	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Michael Jenner at (305 218.3704
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 amoun	nt:
■ \$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.

i. 1	Name of the limited liability company:	.C	
2. (a)	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	1219/13 Date of filing/registration in Florida	4.	13060169520 Document number
5. (8	Registered Agent and Registered Office shown on the records of the	he Florida Dept. (of State:
	1110 Bricke Ave Stc 200 Registered Office Address (MUST BE FLORIDA STREET A		
	Miami .FL	33131	
(b	EMJAY GROUP LLC		70 Pol Domini
	Enter name of NEW Registered Agent and/or NEW Registered (Office address:	
	1401 Brickell Ave		
	NEW Registered Office Address:		
	Ste 320		
	Miami , FL	33131	
the clagent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	the registered bility compan f the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
Sign	nature of a member or authorized representative of a member		Printed or typed name of signee
provi the or to me	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have the change of this change.	ee to act in thi performance of I for in Chapto ereby confirm	s capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been
Signa	ture of Registered Agent		

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