L14000023327

(Requestor's Name)				
(Address)				
(Address)				
(City)	Changia (Dha	- 40		
(City/	State/Zip/Phone	₹ #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
, ,				
(Doc	ument Number)			
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COVER LETTER

Division of Corporations	₩8.
CGJ Realty SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this mate	ter to the following:
Jennifer Simon	
Name of Person	
CGJ Realty	
Firm/Company	
168 Cavalcade Circle	
Address	
Franklin, TN 37069	
City/State and Zip Code	
jen1ton@comcast.net	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Jennifer Simon	954 608-2356
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 amou	int:
☑ \$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. N	ame of the limited liability company: CGJ Realty			
2. (a)		(t	o)	
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	168 Cavalcade Circle		168 Ca	valcade Circle
	Franklin TN 37069		Franklir	n, TN 37069
	02/11/2014		L140000	023327
3.	Date of filing/registration in Florida	4.		Document number
5. (a'				
<i>J.</i> (u)	Registered Agent and Registered Office shown on the records of Jeffrey Wachs, PA	the Florida	a Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET) 1177 SE 3rd Ave	ADDRESS	<u> </u>	- : * :5 2
	Ft. Lauderdale FL	33316		
(b)				19
(-,	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	·
	Hunter B. Craig, PA			2: 22
	NEW Registered Office Address:			_ ~
	2211 E. Sample Rd. #203			<u></u>
	Lighthouse Point .FL	33064		
the ch agent was/y	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regi ability co of the lin limited	stered offic ompany, it nited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mei	eby accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I did in writing of this change.	ree to ac perform d for in hereby c	t in this cap cance of my Chapter 60 confirm tha	spacity. I further agree to comply with the v duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
Signat	ure of Registered Agent			

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