L14000034091

(Reque	estor's Name)	
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(City/S	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Docur	ment Number)
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T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Jonathan Hamilton Properties, LLC Name of Corporation		
DOCUMENT NUMBER: 14 6000 34091		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jonathan Hamilton Properties Firm/Company		
1403 NW 31 St St		
Gainesui lle, FL 32605 City/State and Zip Code		
Jonathan mhamilton @ amail. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: Tonattan Ham, Hon at (321) 482-8080 Name of Contact Person at (321) Area Code & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.
1. The name of the corporation: Jonathan Hamilton Properties
2. The principal office address: 1403 NW 31 St St Gainesville, FL 32605
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/28/14 Document number: L14000034091
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Legaline Corporate Services
_ 2846 NW 79th Ave
Legaline Corporate Services 2846 NW 794 Ave Doval, FL 33122
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jonathan Hamilton 5 5 1403 NW 31st St 50 P.O. Box NOT acceptable Gainesville, FC 32605 5
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. Jountham Hamilton President Signature of an officer or director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 5-14-14 Date
If signing on behalf of an entity:

* * * FILING FEE: \$35.00 * * *

Typed or Printed Name