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S. PRATHER

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations SUBJECT: JAM CATTLE COMPANY LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Brian D. Hudson, Esq. Name of Person Holding Company of The Villages, Inc. Firm/Company 3619 Kiessel Road Address The Villages, Florida 32163 City/State and Zip Code doris.pardo@thevillages.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christi Jacquay 352 753-6612 Name of Person Area Code & Davtime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☑ \$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:JAM CATTLE	E COM	PANY LL	C		
2 (a)	3619 Kiessel Road	1	(b) 3619 Kiessel Road			
~. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	The Villages, Florida 32163		The Villages, Florida 32163			
	04/17/2014		L140000	063248		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Brian D. Hudson, Esq.					
J. (a)	Registered Agent and Registered Office shown on the records of	the Floric	la Dept. of Sta	— te:		
	1020 Lake Sumter Landing					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>	_	~ ~	
		·		_	à	
	The Villages FI	321	62	_	5	
(b)						
				_	- 	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1 Office a	ddress:		<u></u>	
	3617 Kiessel Road				01	
	NEW Registered Office Address:		<u> </u>	_		
				_		
	The Villages , Fi	. 3216	3			
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regiability cof the line limited	istered offic ompany, it nited liabili liability cor	te and the business off is hereby confirmed the ty company or as othe impany.	fice of the registered nat the change(s)	
Signa	ture of a member or authorized representative of a member	DI	ian D. Hud	Printed or typed name o	f signee	
l here provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I d in writing of this change.	perforn d for in	nance of my Chapter 60	pacity. I further agree duties, and I am fami 5, F.S. Or, if this doc	to comply with the liar with and accept ument is being filed	
Signatu	rrc of Registered Agent Brian D. Hudson, Esq.					