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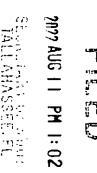
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COVER LETTER

Division of Corporations	
SUBJECT:IJTE Holdings LLC	
Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
John T. Skolfield III	
Name of Person	
JJTE Holdings LLC	
Firm/Company	
118 W. Comstock Ave.	
Address	
Winter Park, Fl 32789	
City/State and Zip Code	
Anthony@skohomes.com	
E-mail address: (to be used for future annual repor	t nouncation)
For further information concerning this matter, please co	all:
Anthony Rizzo at (at (407) 468-8918
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	:
■ \$25 Filing Fee	☐ \$55 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.

1. N	ame of the limited liability company:JJTE Holding	s LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) <u>_1</u>	18 W. Comstock Ave. Winter Park, Fl 32789 Mailing address of hmited liability company: (Note: MAY BE POST OFFICE BOX)
3.	05/01/2014 Date of filing/registration in Florida		L1400'0070861 Document number
5. (a)	John T. Skolfield III		
(b)	Registered Office Address (MUST BE FLORIDA STREET 118 West Comstock Avenue Winter Park , F Patrick C. Crowell Enter name of NEW Registered Agent and/or NEW Registere NEW Registered Office Address:	L_32789	TALLAHASSEE, FL
	250 S. Park, Avenue Suite 200	,	
	Winter Park, F	L_32789	
change agent was/w the art Signal I here provis the obto mer notifie	timited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members iclos of organization of the serating agreement of the attree of a member or authorized representative of a member of the appointment as registered agent and against of all statutes relative to the proper and complete ligations of my position as registered agent as provide the reflect a change in the registered office address. If the office is the proper and complete the proper a	e registered o iability compa of the limited liability compact in the compact of	flice and the business office of the registered any, it is hereby confirmed that the change(s) hability company or as otherwise provided in lity company. The Solve of July of July Printed or typed name of signee this capacity. I further agree to comply with the coffine duties, and Lam familiar with and accept

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