

L140000120834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

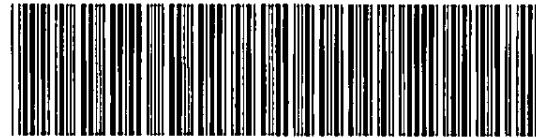
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800304853558

10/26/17--01003--019 **25.00

RECEIVED

17 OCT 27 AM 8:49

OCT 27 2017

Y SU' VER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JM Holdings of Geneva, 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:

James Hodges

Name of Person

JM Holdings of Geneva, LLC

Firm/Company

850 Seminole Woods Blvd

Address

Geneva, FL 32732

City/State and Zip Code

jh@seminolestatecon.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Magie Hodges

Name of Person

407

at ()

467-6408

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 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. Name of the limited liability company: JM Holdings of Geneva, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

850 Seminole Woods Blvd

850 Seminole Woods Blvd

Geneva, FL 32732

Geneva, FL 32732

07/31/2014

L140000120834

3. _____
Date of filing/registration in Florida

4. _____
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Jamie Hodges

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3850 E Lake Mary Blvd

Sanford, FL 32773

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

James H Hodges

NEW Registered Office Address:

850 Seminole Woods Blvd.

Geneva, FL 32732

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

James H Hodges

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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