

L14000 149 350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

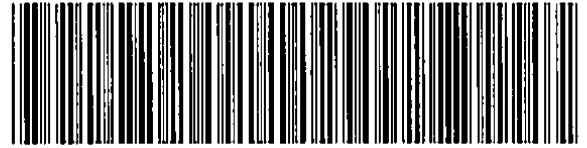
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2019 AUG 26 AM 10:11

FBI ED

C. GOLDEN

AUG 28 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JML BAY HARBOR 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:

JACK E. KARSON
Name of Person

JML BAY HARBOR LLC
Firm/Company

10201 E. BAY HARBOR DR., PH-6
Address

BAY HARBOR, FL - 33154 -
City/State and Zip Code

JKarson@turnberry.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACK KARSON at (305) 794-5853
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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2019

JACK E. KARSON
10201 E BAY HARBOR DRIVE PH-6
BAY HARBOR, FL 33154

SUBJECT: JML BAY HARBOR, LLC
Ref. Number: L14000149350

We have received your document and check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 419A00016438

2019 AUG 26 AM 11:25

RECEIVED

**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: JML BAY HARBOR LLC
2. (a) 10201 E. BAY HARBOR DR. (b) 10201 E. BAY HARBOR DR.
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
- PH-6 PH-6
BAY HARBOR, FL - 33154 BAY HARBOR, FL - 33154
- 09-19-2014 L14000149350
3. Date of filing/registration in Florida 4. Document number

5. (a) JACK E. KARSON
Registered Agent and Registered Office shown on the records of the Florida Dept. of State.

2000 SOUTH BAYSHORE DRIVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 71

MIAMI

FL

33133

(b)

Enter name of NEW Registered Agent and/or NEW Registered Office address:

10201 E. BAY HARBOR DR
PH-6

NEW Registered Office Address:

BAY HARBOR FL 33154

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

Printed or typed name of signer

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