

**L14000187654**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2016 NOV 21 A 11:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**S Warren**

**NOV 22 2016**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 10, 2016

JAMES S. HICKS JR  
5703 RED BUS LANE ROAD, UNIT #266  
WINTER SPRINGS, FL 32708-4969

SUBJECT: JH OPERATIONS, LLC  
Ref. Number: L14000187654

We have received your document for JH OPERATIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 816A00024250

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JH OPERATIONS, 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 S. HECKS JR.

Name of Person

JH OPERATIONS, LLC

Firm/Company

5703 RED BUCK LAKE ROAD, UNIT #266

Address

WINTER SPRINGS, FL 32708-4969

City/State and Zip Code

HECKS591@HOTMAIL.COM

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

For further information concerning this matter, please call:

JAMES S. HECKS JR. at (861) 543-6778

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

**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: TH OPERATIONS, LLC
2. (a) 5703 RED BUCK LAKE ROAD (b) 5703 RED BUCK LAKE ROAD  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
UNIT # 266 UNIT # 266  
WINTER SPRINGS, FL 32708-4969 WINTER SPRINGS, FL 32709-4969
3. DECEMBER 8, 2014 4. L14000187654  
Date of filing/registration in Florida Document number
5. (a) CORPORATE CREATIONS INTERNATIONAL, INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
11380 PROSPERITY FARMS ROAD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SUITE # 221E  
PALM BEACH GARDENS, FL 33410-3465
- (b) REGISTERED AGENTS, INC.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
3030 NORTH ROCKY POINT DRIVE  
NEW Registered Office Address:  
SUITE # 150A  
TAMPA, FL 33607-7200

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TALLAHASSEE, FLORIDA

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.

J. L. Hicks Jr.  
Signature of a member or authorized representative of a member

JAMES S. HICKS JR.  
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.

Bill Adams  
Signature of Registered Agent