(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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JUN 22 2018 D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations			
JAX DEERWOOD LLC SUBJECT:			
	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	g this matter to the following:		
VANESSA BERTUCA			
Name of Person			
GOLDELM			
Firm/Company			
7000 MAE ANNE AVE OFFICE			
Address			
RENO NV 89523			a Essa
City/State and Zip Coo	de	경 근유	
accounting@goldelm.com		¥ 20	
E-mail address: (to be used for future	annual report notification)		
For further information concerning this ma	tter, please call:		ΟR SA
VANESSA BERTUCA	775 747-7500	ō	SKCHI
Name of Person	at ()		1,
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 follow	ving amount:		
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INH\$18 (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.

L Na	ame of the limited liability company: JAX DEERW	OOD LLC			
2. (a)	7000 MAE ANNE AVE				
- (- ,	Principal office address of limited fiability company; (Note: MUST BE STREET ADDRESS)		Mailing address of limited liabi (Nate: MAY BE POST OF)	•	-
	OFFICE	OFFIC	OFFICE RENO NV 89523		
	RENO NV 89523	RENO			
	01/05/2015	L150000	001978		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	MOSES, MICHAEL				
. (4)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	ate:		
	12443 SAN JOSE BL				
	Registered Office Address (MUST BE FLORID.) STREET	ADDRESS)	_		
	SUITE 604				
	JACKSONVILLE , FI	32223	_		
dx	HUBBARD, RODERICK				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	_	∞ ′	芸芸
				K.O.	
	5333 SW 75TH ST		_	20	
	NEW Registered Office Address:			 	
	OFFICE			£.	73.0 1.S
	GAINESVILLE	32608		10	MIL
Tabala . 1	,		— Namida la la la mada a son filma	معاط المعام	
the cha agent v was/wa	imited liability company is not organized under the la inge 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 in icles of organization of the operating agreement of the	f the registered offi lability company, it of the limited liabil e limited liability co	ce and the business office is hereby confirmed that t ity company or as otherwis impany.	of the reg he change	istered (s)
	Milland	RODERICK	R HUBBARD		
	ture of a member or authorized representative of a member		Printed or typed name of sign		(-1 -1
provisi the obi to mer notifie	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 ely reflect a change in the registered office address, I d in writing of this charge.	ree to act in this ca e performance of m ed for in Chapter bl hereby confirm tha	pacity. I further agree to a y duties, and I am familiar 95, F.S. Or, if this docume at the limited liability comp	comply wi with and nt is bein pany has f	ith the accept g filed seen
Signatu	re of Rogistered Agent				

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