L15006033267

(Requestor's Name)	
(Address)	
(Address)	<u></u>
(City/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Nar	ne)
(Document Number)	
Certified Copies	Certificates	s of Status
Special Instructions	to Filing Officer:	
AM 7:50		
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July 6, 2016

JEFF ABBEY 1600 NW 11TH ST BOCA RATON, FL 33486

SUBJECT: JDA PROPERTY MAINTENANCE, LLC

Ref. Number: L15000033267

We have received your document for JDA PROPERTY MAINTENANCE, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 116A00014103

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Division of Corporations	
UBJECT: JDA Property MAINTENANCE LLC Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Teff Abbey Name of Person JDA Property MAINTENANCE LLC Firm/Company	
Address Bock RATON FL 33484 City/State and Zip Code	
Tefabby 6 act. Com E-mail address: (to be used for future annual report notification)	•
or further information concerning this matter, please call:	
Test Abbey Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 at (56) 445-1914 Area Code & Daytime Telephone Number 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 SENT ALREADY 🖸 \$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.

	me of the limited liability company:	
(a)	Principal office address of limited liability company: 334fc; (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		,
	2/23/2015	L15000033267
	Date of filing/registration in Florida 4.	Document number
. (a)	MARIA Abbell	
(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_
	1600 NW 11th ST. BOLA RATUR ,FL 334F6	_
	BOLA RATOR ,FL 33486	man (
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
	4	
	NEW Pagintard Office Address	
	NEW Registered Office Address:	
	1600 NW 11th 51.	<u> </u>
		3
	BOLA RATON , FL 33456	
the li	imited liability company is not organized under the laws of the State of Finge or changes are made, the Florida street address of the registered offi	lorida, it is hereby confirmed that after
gent w	vill be identical. Or, in the case of a Florida limited liability company, it	is hereby confirmed that the change(s)*
as/wc	ere authorized by an affirmative vote of the members of the limited liabil cles of organization or the operating agreement of the limited liability co	ity company or as otherwise provided in
		_ · .
Signat	ture of a member or authorized representative of a member	Printed or typed name of signee
		••
roviși	ons of all statutes relative to the proper and complete performance of m	pactiv. Tjurther agree to comply with the y duties, and I am Jamiliar with ana acce.
ne ooi	by accept the appointment as registered agent and agree to act in this ca ons of all statules relative to the proper and complete performance of m igations of my position as registered agent as provided for in Chapter 60 ely reflect a change in the registered office address, I hereby confirm tha d in writing of this change.	בו, ר.s. Or, if this document is being file If the limited liability company has been
otified	t in writing of this change.	

Signature of