



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PB&J INVESTMENT PROPERTIES 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:

Pamela D Colby-Ignoffo  
Name of Person

Firm/Company

PO Box 42  
Address

Fleetwood, NC 28626  
City/State and Zip Code

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

For further information concerning this matter, please call:

Pamela D Colby-Ignoffo                      336                      977-5624  
Name of Person                                      at (                      )                      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

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REGISTRATION SECTION

**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.*

**PB&J INVESTMENT PROPERTIES LLC**

1. Name of the limited liability company: \_\_\_\_\_

2. (a) 185 Dr MLK Jr St N (b) PO Box 42

Principal office address of limited liability company: \_\_\_\_\_ Mailing address of limited liability company: \_\_\_\_\_  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

St Petersburg, FL 33701 Fleetwood, NC 28626

March 11, 2015 L15000044564

3. Date of filing/registration in Florida 4. Document number

Pamela D. Colby

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

13306 Gulf Blvd, Madeira Beach, FL 33708

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

13306 Gulf Blvd

Madeira Beach 33708  
 \_\_\_\_\_, FL \_\_\_\_\_

(b) Michael Hildebrandt

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

10300 49th St N, Clearwater, FL 33762

NEW Registered Office Address:

10300 49th St N

Clearwater 33762  
 \_\_\_\_\_, FL \_\_\_\_\_

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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.

Joseph T Ignoffo, Mgr.  
 Signature of a member or authorized representative of a member

JOSEPH T IGNOFFO, MGR  
 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.*

Michael Hildebrandt  
 Signature of Registered Agent