

(Re	questor's Name	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	ime)
(Ďo	cument Number	)
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Certified Copies	Certificate	es of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

1

	Division of Corporations				
CHRIEC	PB&J INVESTMENT PRO	PERTIES LLC			
SUBJEC		ume of Limited Lia	ability Company		
Dear Sir	or Madam:				
The enclo	osed Registered Agent/Registered Of	ffice Change and	fee(s) are submitted for filing.		
Please ret	turn all correspondence concerning t	this matter to the f	ollowing:		
Pamela	D Colby-Ignoffo				
	Name of Person		_		
	Firm/Company	· " <u>-</u> "	_		
PO Box	<b>: 42</b>				
*	Address		_		
Fleetwo	ood, NC 28626		:		
	City/State and Zip Code	<u> </u>	_		
pamcoil	by@icloud.com				
E-m	nail address: (to be used for future an	nual report notific	eation)		
For further	er information concerning this matter	r, please call:			
Pamela	D Colby-Ignoffo	336 at (	977-5624		
	Name of Person	at (	Area Code & Daytime Telephone Number		
R D C 20	TREET/COURIER ADDRESS: Legistration Section Division of Corporations Elifton Building 661 Executive Center Circle Callahassee, Florida 32301	Reg Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
E	nclosed is a check for the following	g amount:			
Z	\$25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy		
INHS18 (2	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.

Name of the limited liability compa	PB&J INVES	TMENT	PROPER	ITIES LLC	
185 Dr MLK Jr St N	•	(b	PO Box	42	•
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  St Petersburg, FL 33701		(0	N	Mailing address of limited I (Note: MAY BE POST) ad, NC 28626	
	· · · · · · · · · · · · · · · · · · ·				
March 11, 2015			L1500004	4564	
Date of filing/registration Pamela D. Colby	on in Florida	4.		Document number	= 7
Registered Agent and Registered Office 13306 Gulf Blvd, Madeira			Dept. of State	ε	JAN -6
Registered Office Address 13306 Gulf Blvd	BE FLORIDA STREET	<u>ADDRESS</u>	1		P :
Madeira Beach	, FI	33708			1:24
Michael Hildebrandt					
Enter name of <u>NEW Registered Agen</u>	t and/or NEW Registered	d Office add	lress:		
10300 49th St N, Clearwa	ter, FL 33762				
NEW Registered Office Address:			<del></del>		
10300 49th St N		<u>.</u>			
Clearwater	, FI	33762			
	,		C. 4 CE1		C 4 41- 4 - A
e limited liability company is not o hange or changes are made, the Flo	orida street address o	f the regis	tered office	and the business offi	ice of the registere
t will be identical. Or, in the case were authorized by an affirmative	vote of the members	of the lim	ited liability	company or as other	at the change(s) wise provided in
rticles of organization or the opera	ting agreement of the			ipany. SNOFFO, MGR	
grature of a member or authorized represen	ge.			·	ciana
'    <b>4</b>    •			41.in n	Printed or typed name of	
reby accept the appointment as reg isions of all statutes relative to the obligations of my position as regist erely reflect a change in the regist fied in writing of this change.	gistered agent and ag proper and complete ered agent as provide ered office address, I	ree to act e perform ed for in ( hereby co	in this capt ince of my o Chapter 605 onfirm that	icity. I juriner agree luties, and I am famil , F.S. Or, if this docu the limited liability co	to comply with the lar with and accept iment is being filed impany has been
Michael Hildelor	nadt				