

215 0000 46848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

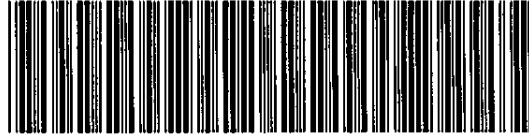
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200271030092

200271030092  
03/30/15--01033--019 \*\*25.00

FILED  
15 MAR 30 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 02 2014  
C. CARROTHERS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CDJ REAL ESTATE INVESTING, 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:

CALVIN JONES

Name of Person

Firm/Company

PO Box 413266

Address

MIAMI, FL 33247

City/State and Zip Code

DEMETRIUS JONES @ HOTMAIL.COM

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

For further information concerning this matter, please call:

CALVIN JONES

Name of Person

at ( 305 ) 613-0583

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: CDJ REAL ESTATE INVESTING, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

1511 NW 44th ST  
MIAMI, FL 33142

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

PO Box 473266  
MIAMI, FL 33247

MARCH 16, 2015

L15000046848

3. Date of filing/registration in Florida

4. Document number

5. (a) Calvin Jones

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3510 NW 83rd ST  
MIAMI, FL 33147

(b)

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

1511 NW 44th ST Calvin Jones

**NEW Registered Office Address:**

1511 NW 44th ST

MIAMI, FL 33142

FILED  
15 MAR 30 PM 12:54  
SECRETARY OF STATE  
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.

Calvin Jones

Signature of a member or authorized representative of a member

CALVIN JONES

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 advised of this change.