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(Re	equestor's Name)	
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RA Change

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5/29/15

COVER LETTER

TO Baringston Carlos		
TO: Registration Section Division of Corporations		
hacking Malila 110		
SUBJECT: Justin's Mobile, 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:		
Shanna L. Austin, Esg.		
Shanna L. Austin, ESG. Name of Person		
La valtice of Cocionaltabile + Cont. story DA		
Law Office of Grigaltchikt Galustov, P.A.		
6144 Gozebo PORK Pl. S.5# 103		
Address		
Jacksonville, FL 32257		
City/State and Zip Code		
Stanian arialaw.com		
Shanns griglaw. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
0 10 11 128 0200		
Shorno Hustin, Esq. at (904) +38-8378		
Name of Person Area Code & Daytime Telephone Nu	nber	
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314		
·		
Tallahassee, Florida 32301		
Tallahassee, Florida 32301 Enclosed is a check for the following amount:		

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: Justin's Mobile LLC
2. (a) Justin's Hobile, LC (b) Justin's Mubile, LC
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
6250 North Street 6250 North Street
Jacksonville, FC Jacksonville, FC
04/30/2015 L15000080646
3. Date of filing/registration in Florida 4. Document number
5. (a) Shanna Austin, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Law Office of David B. Sacks, P.A. 3
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4494 South Sicle Blvd., Ste. 101
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Law Office of David B. Sacks, P.A. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4494 Southside Blvd., Ste. 101 bcksonville, FL 32216
(b) Shanne L. Austin, Esq.
(b) Short L. Mustin, 25G. Enter name of NEW Registered Agent and/or NEW Registered Office address:
Law Office of Grigoltchik + Galustov, P.A.
NEW Registered Office Address:
6144 , Yazebo Park Pl. S., #103
Jacksonville , FL 32257
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.
Signature of a member of authorized representative of a member Justin Unclan Printed or typed name of signee
Signature of a member or authorized representative of a member 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.
Signature of Registered Agent

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