L1500008381

(Reque	estor's Name)				
(Addres					
(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:					
ZOITHA TALLANDA					
<u>}</u>					

Office Use Only



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TO MAY AT DRIVEN TO STATE

MAY 03 2017 J. HARRIS

'COVER LETTER

ro: Registration Section Division of Corporations					
JC III's Handyman Services, LLC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
Johnnie Cobbs III					
Name of Person					
JC III's Handyman Services, LLC					
Firm/Company					
4414 Timber Hollow Way					
Address					
Jacksonville, FL 32224					
City/State and Zip Code					
cobbsj@comcast.net					
E-mail address: (to be used for future annual report	t notification)				
For further information concerning this matter, please concerning	all:				
Johnnie Cobbs III 90)4 338-4198)				
Name of Person	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				

INHS18 (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.

1. N	ame of the limited liability company: JC III's Hand	yman Ser	vices, LLC	
2. (a)		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of	limited liability company:
	4414 Timber Hollow Way	4	1414 Timber Hollow	Way
	Jacksonville, FL 32224		Jacksonville, FL 3222	24
	May 19, 2015	L	15000088381	
3.	Date of filing/registration in Florida	4.	Document nun	nber
5. (a)				
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:	
	United States Corporation Agents, INC			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	······································	3 - A
	13302 Winding Oak Court A			HAY
	Tampa ,FL	33612		ANY CE
				
(b)	Enter name of NEW Registered Agent and/or NEW Registered			3: 24
	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u>ess</u> :	
	Johnnie Cobbs III			
	NEW Registered Office Address:			
	4414 Timber Hollow Way		 	
	Jacksonville . FI	32224		
the chaagent was/w the aft Signal I here provis the object to mer notific	dimited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of ioles of organization or the operating agreement of the liture of a member or authorized representative of a member of the light of a member of all statutes relative to the proper and complete light of the proper and complete light o	f the registe ability com of the limite limited lia John	red office and the busine pany, it is hereby confirmed liability company or a bility company. nie Cobbs III Printed or typed or	ss office of the registered med that the change(s) s otherwise provided in