

h15 000179150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

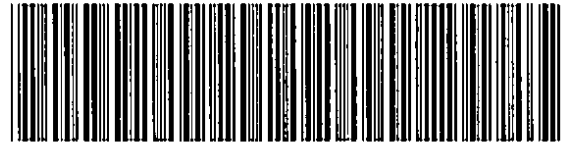
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FL

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JPD PARTNERS 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:

PATRICK ASSALI
Name of Person

JPD PARTNERS LLC
Firm/Company

11240 NW 122nd Street
Address

Medley, FL 33178
City/State and Zip Code

passali@advance-tire.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick Assali at (305) 793-2138
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2022

PATRICK ASSALI
11240 NW 122 STREET
SUITE 700
MEDLEY, FL 33178

SUBJECT: JPD PARTNERS LLC
Ref. Number: L15000179150

*This original check was deposited.
Therefore we are not sending another check.*

We have received your document for JPD PARTNERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 222A00023358

NOV - 3 2022

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: JPD Partners LLC
2. (a) 11240 NW 122nd Street
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Sute 700
Medley, FL 33178
- (b) 11240 NW 122nd Street
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Suite 700
Medley, FL 33178
3. 1/21/2015 Date of filing/registration in Florida
4. L15000179150 Document number

5. (a) Kuker Howard L Esq
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
508 S Dadeland Towers North
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
9200 S. Dadeland Blvd
Miami, FL 33156

- (b) Hoyos & Aguilar PA,
Enter name of NEW Registered Agent and/or NEW Registered Office address:
814 Ponce de Leon Blvd
NEW Registered Office Address:
Suite 310
Coral Gables, FL 33134

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SECRETARY OF STATE
TALLAHASSEE, FL

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 or authorized representative of a member

Patrick Assali

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]

Signature of Registered Agent