

LS000184396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

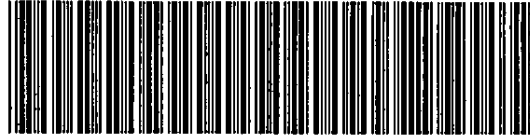
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16 JUN 24 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/27/16.85

JOBES LAW FIRM, LLC

3107 West Hallandale Beach Blvd.
Suite 1A
Pembroke Park, FL 33009
Phone: 954-613-0595 Fax: 954-613-0596
Email: mjobs@jobeslaw.com

Attn: Dionne M. Scott
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Jobes Law Firm, LLC
Reference #L15000184396

Dear Ms. Dionne:

In response to your correspondence dated June 6, 2016 (copy attached), please find attached Statement of Change of Registered Office together with corrections made pursuant to your request.

Thank you in advance for your prompt attention to this matter. Should you have any questions, please feel free to contact our office at the above referenced contact number.

Respectfully,


Merrilee A. Jobes, Esq.

MAJ/lam
Enclosure

2016 JUN 24 PM 3:05
TALLAHASSEE, FLORIDA

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16 JUN 24 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JOBES LAW FIRM, 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:

Merrilee Jobs

Name of Person

Jobs Law Firm, LLC

Firm/Company

3107 W. Hallandale Beach Blvd., Suite 1A

Address

Pembroke Park, FL 33009

City/State and Zip Code

mjobs@jobeslaw.com

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

For further information concerning this matter, please call:

Merrilee Jobs

954

613-0595

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

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16 JUN 26 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: JOBES LAW FIRM, LLC

2. (a) 3107 W. Hallandale Beach Blvd., Suite 1A (b) 3107 W. Hallandale Beach Blvd., Suite 1A

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Pembroke Park, FL 33009

Pembroke Park, FL 33009

10/29/2015

L15000184396

3. Date of filing/registration in Florida

4. Document number

5. (a) Merrilee Jobes

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

3127 W. Hallandale Beach Blvd., Suite 101

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Pembroke Park, FL 33009

(b) Merrilee A. Jobes

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

3107 W. Hallandale Beach Blvd., Suite 1A

NEW Registered Office Address:

Pembroke Park, FL 33009

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16 JUN 24 PM 12:30
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.

Merrilee Jobes
Signature of member or authorized representative of a member

Merrilee Jobes

Printed or typed name of signer

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.

Merrilee Jobes
Signature of Registered Agent

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