## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-€383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062

Phone : (323) 962-8600 Fax Number : (323) 962-3889

\*\*Enter the email address for this business entity to be used for that annual report mailings. Enter only one email address please

Email Address:

## LLC REGISTERED AGENT CHANGE JUSNOME ENTERTAINMENT, LLC

Certificate of Status		0
Certified Copy	11	1
Page Count		06
Estimated Charge		\$55.00

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Corporate Filing Menu

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## COVER LETTER

TO:	Registration Section Division of Corporations					
C11b tf	JUSNOME ENTERTAINME	NT, LLC	,			
SUBJE	CT: Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ice Change ar	nd fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	is matter to th	e following:			
Chey	enne Moseley					
	Name of Person		<del></del>			
Legal	zoom.com, Inc.					
	Firm/Company	-	<del></del>			
101 N	N. Brand Blvd., 10th Floor					
	Address		<del></del>			
Glend	dale, CA 91203					
	City/State and Zip Code		ë.			
•	meent@gmail.com					
E	-mail address: (to be used for future ann	nual report no	ification)			
For fur	ther information concerning this matter,	please call:				
Chey	enne Moseley	800 n1 (	773-0888 ext 9724			
-	Name of Person	\ <u></u>	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.C. Box = 327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	amount:				
	□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHSE	8 (2/14)					

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

l. N	ame of the limited liability company: JUSNOME 11924 KAJETAN LANE		11924 K			
ż. (a)	Principal office address of limited liability company: (Note: MUST BE STREET APPRESS)  ORLANDO, FL 32827	(b	(b) 11924 KAJETAN LANE  Mailing address of limited liability company:  (Note: MAY BE PUST OFFICE BOX)  ORLANDO, FL 32827			
	11/12/2015		L1500019	1607		
s.	Date of filing/registration in Florida	4,		Document number		
5. (a)	Moseley, Cheynne				≥ 0.	
· ()	Registered Agent and Registered Offices shown on the records of 13302 WINDING OAKS COURT	of the Florida	Dept. of State	:	17 BEC ECKET	
	Registered Office Address (MIST RE FLORIDA STREET ADDRESS)				25 S	
	SUITE A				100 m	, ~
	TAMPA	<sub>rL</sub> 33612				- 1 m
(b)	Enter name of NEW Registered Agent and/or NEW Reablest UNITED STATES CORPORATION AGEN			•	IO ATL MIDA	
	NEW Registered Office Address:					
	13302 WINDING OAK COURT, SUITE A		:			
	ТАМРА	<sub>FL</sub> 33612		_		
the chagent was/w	limited liability company is not organized under the auge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ricles of expanization or the operating agreement of the author of a member of such accept the appointment as registered agent and attorn of all statistics relative to the proper and completions of my position as registered agent as provincily reflect a change in the registered office address.	of the reginal lability of sof the limited GA agrae to action perform ded for in I hereby of	ompany, it is dited liability liability con RINER F	s and the outliness of s hereby confirmed y company or as of apany.  RAYMOND  Printed or weed name	that the chang herwise provid	e(s) ed in

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