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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JDL Enterprises 1, LLC	·	
Name of Li	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
James D. Lopker Name of Person	· .	
JDL Enterprises 1 LLC		
Firm/Company		
3444 S. Congress Are		SECR.
Address		高二
Palm Springs FL 33461		TARY OF STATE
City/State and Zip Code		FLOR
jlopker@ the palms recovery. co	M	最高,二
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please	call:	
	561 239-6478	
Name of Person	Area Code & Daytime Telepho	one 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 amoun	nt:	
\$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.

l. Na	nme of the limited liability company:	rprises I	ис	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3444 S. Congress Ave		3444 S. Congress Ave	
	Palm Springs FL 33461		Palm Springs FC 33461	
	3-31-2016		L 16000064431	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	James D Lopker			
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET AL 3444 S. Congress Are Adm Springs FL 33461, FL	DDRESS)	Sinte.	
(b)	Enter name of NEW Registered Agent and/or NEW Registered O		FILE PRIARY CONTRACTOR	
	· · ·		PH IZ	
	NEW Registered Office Address: 3444 S. Congress Are			
	Palm Springs ,FL_	3346/		
the char agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	ne registered off ility company, i the limited liabi	fice and the business office of the register it is hereby confirmed that the change(s) pility company or as otherwise provided in	
Signati	ure of a member or authorized representative of a member	-	Printed or typed name of signee	
попреа	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of fly polition as registered agent as provided j ly reflect alchange in the registered office address. I he in writing of this change.	e to act in this co erformance of m for in Chapter 6 reby confirm the	capacity. I further agree to comply with the my duties, and I am familiar with and accessors. Or, if this document is being file and the limited liability company has been	e pt d