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COVER LETTER

TO: Registration Section Division of Corporations

Factor Eleven, LLC SUBJECT:

.

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:

Elizabeth A Jones

Name of Person

Factor Eleven, LLC

Firm/Company

13800 Herons Landing Way, Unit 11

Address

Jacksonville, Florida 32224

City/State and Zip Code

factor11designs@gmail.com

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

For further information concerning this matter, please call:

Elizabeth A Jones	443 690-4642				
Name of Person	Area Code & Daytime Telephone Numb				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, Florida 32314				
Tallahassee, Florida 32301					

☑ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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. Na	me of the limited liability company: Factor Eleve	n, LLC					
2. (a)	13800 Herons Landing Way	(Ե	, 13800 He	lerons Landing Way			
(11)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	(1	Mai	iling address of Note: MAY B.			
	Unit 11		Unit 11				
	Jacksonville, Florida 32224		Jacksonvil	lle, Florida	322	24	
	05/05/2016		L16000091	258			
3.	Date of filing/registration in Florida		D	ocument nu	mber		
5. (a)	Jones, Ian M						
	Registered Agent and Registered Office shown on the records of 3127 Kernan Lake Cir.	î the Florida	Dept. of State:				
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> Apt. 304	ADDRESS	2	- - -		2017 0CT 10	
	Jacksonville	32246			່ ກ ຊ		e crane. F
(b)	Ian M Jones Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	Irex		т. т. Г. н. т.	PH 2:	
	Enter hand of <u>enter Registered Agent</u> and of <u>enter Registered</u>		<u> </u>	•	•	0 5	
	13800 Herons Landing Way						
	<u>NEW</u> Registered Office Address:						
	Unit 11						
	Jacksonville Fi	32224					
the cha agent v was/we	imited liability company is not organized under the la inge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regis iability co of the lim	itered office a impany, it is h ited liability c	nd the busin hereby confit company or a	iess o rmed	ffice (that th	of the registered to change(s)
	Gender and	Eliz	abeth A. Jo				
÷.	ture of a member or authorized representative of a member			rinted or typed			
provisi the obl to merg	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a chapge in the registered office address. I I in writing of this change.	ree to act 2 performa ed for in C hereby co	in this capac ince of my du Thapter 605, 1 onfirm that the	ity. 4 furthes ties, and 1 a S. Or, if the limited liat	r agre m fan his do bility	ee to c niliar cumei compi	omply with the with and accept it is being filed any has been

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

Signatury of Registered Agent