

L16 000 115760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

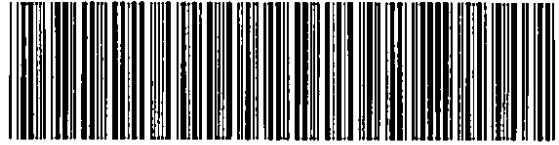
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SECRETARY OF STATE
TALLAHASSEE, FL 323

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BBJ OF KEY WEST 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:

JOHN MOEN
Name of Person

LIBERTY TAX
Firm/Company

920A KENNEDY DRIVE
Address

KEY WEST, FL 33040
City/State and Zip Code

SERVICE.KW@LIBTAXPREP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN MOEN 305 453-6642
Name of Person at () 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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.9114 or 605.9116, 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: BJJ OF KEY WEST LLC

2. (a) Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)
1075 DUVAL STREET C-12
KEY WEST FL 33040

(b) Mailing address of limited liability company.
(Note: MAY BE POST OFFICE BOX)
920A KENNEDY DRIVE
KEY WEST FL 33040

3. 10/01/2022 Date of filing/registration in Florida

4. L12047 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
GADONNIEX, JOHN J. JR
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
1015 NORTHERN DANCER CRT
CASSELBERRY, FL 32707

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
LIBERTY TAX
NEW Registered Office Address:
920A KENNEDY DRIVE
KEY WEST, FL 33040

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.

John Gadonniex

Signature of a member or authorized representative of a member

JOHN J GADONNIEX, JR.

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.

Signature of Registered Agent

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

FILED
2022 OCT -7 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FL 32301