116000147129

	Requestor's Name)				
(,	Address)				
(.	Address)				
(1	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(1	Business Entity Name)				
(1	Document Number)				
Certified Copies	Certificates of Status				
Special Instructions	to Filing Officer:				
	Mils				
Office Use Only					



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94/93/24--81017--007 **25.00



COVER LETTER

TO: Registration Section Division of Corporations					
JCSA FLORIDA LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	ce Change and fe	ee(s) are submitted for filing.			
Please return all correspondence concerning this	s matter to the fo	llowing:			
Cameron Biddy					
Name of Person		_			
ZenBusiness Inc.					
Firm/Company		_			
336 E. College Ave. Suite 301					
Address		_			
Tallahassee, FL 32301					
City/State and Zip Code		-			
ra@zenbusiness.com					
E-mail address: (to be used for future annu	ual report notifica	ation)			
For further information concerning this matter,	please call:				
Cameron Biddy	844 at (493-6249			
Name of Person		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			

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.

1. N	ame of the limited liability company: JCSA FLORIDA	LLC					
2. (a)	174 SEDONA WAY	(b) 174 SEDONA WAY					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	PALM BEACH GARDENS, FL 33418	_	<u> </u>	PALM BEACH GARDENS, FL 33-	1 18		
	08/05/2016		L	.16000147129			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Ansher, Bernard						
J. (u)	Registered Agent and Registered Office shown on the records of 174 SEDONA WAY			ept, of State:			
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRES</u>	<u>:S)</u>	TAN TAN	2024 APR		
	PALM BEACH GARDENS , FL	33418		 	APR -		
(b)	ZenBusiness Inc.	<u> </u>	- S	; [N			
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>ddre</u>	<u>ew</u> :	-25-		
	336 E. College Ave.	्रा <u>प्र</u> ेत् स्थान	1: 02				
	NEW Registered Office Address:			•			
	Suite 301						
	Tallahassee, FL	32301					
change agent was/w the art	limited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the Cheryl Furlan	register ability co of the lin limited	red omposite	office and the business office of pany, it is hereby confirmed that ed liability company or as otherw	the reg	istered ange(s)	
Signa	Signature of a member or authorized representative of a member			Printed or typed name of signce			
I here provis the ob to mer notifie	hy accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d in writing of this change.	ee to ac perform d for in hereby c	t in tanc Cha conf	this capacity. I further agree to ce of my duties, and I am familia apter 605, F.S. Or, if this docum firm that the limited liability com	comply r with o ent is b pany he	y with the and accept being filed as been	
Signati	ire of Registered Agent						