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S. WARREN : AUG 0 8 2017

COVER LETTER

	Registration Section Division of Corporations		
	JCD Compass, LLC.		(
SUBJE		Limited Liability Company	
Dear Si	r or Madam:		
The enc	closed Registered Agent/Registered Office C	hange and fee(s) are submitted	for filing.
Please r	return all correspondence concerning this ma	atter to the following:	
Maria -	Juliana Cantini		
	Name of Person		
JCD C	Compass, LLC.		
	Firm/Company		
16101	Emerald Estates Drive #458		
	Address		
Westo	on, Florida 33331		
	City/State and Zip Code		
	iju@gmail.com		
E-	-mail address: (to be used for future annual)	report notification)	
For furt	ther information concerning this matter, plea	ise call:	
Maria	Juliana Cantini	954 235-7211	
	Name of Person	Area Code & Dayt	ime Telephone Numbe
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 32.	s
	Enclosed is a check for the following am	ount:	
	☐ \$25 Filing Fee	☑ \$55 Filling Fee & Certi	fied Copy
INHS18	3 (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.

. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	16101 Emerald Estates Drive # 458	1610	1 Emerald Estates Drive #458
	Weston, Florida 33331	West	on, Florida 33331
	August 24, 2016	L1600	0158489
-	Date of filing/registration in Florida	4.	Document number
. (a)			
. (,	Registered Agent and Registered Office shown on the records of	f the Florida Dept, of	'State:
	Maria Juliana Cantini	<u> </u>	<u> </u>
	Registered Office Address	<u> ADDRESS)</u>	17
	561 Slippery Rock Rd		FILED AUG-7 PH L: 10
	Weston,	. 33327	FILED 6-7 PM
(b)			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address:	
	Maria Juliana Cantini		>
	NEW Registered Office Address:		
	16101 Emerald Estates Drive #458		
	Weston	, 33331	
	, I'	I. <u> </u>	
the l	imited liability company is not organized under the la unge or changes are made, the Florida street address o	iws of the State o	f Florida, it is hereby confirmed that after
gent v	vill be identical. Or, in the case of a Florida limited I	iability company.	it is hereby confirmed that the change(s)
'as/wo	ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the limited hal e limited liability	offity company or as otherwise provided in company.
			ana Cantini
Signa	function function (and member of a member		Printed or typed name of signee
here.	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complete igations of my position as registered agent as provid by reflect a change in the registered office address. I	gree to act in this e performance of ed for in Chapter Thereby confirm t	capacity. I further agree to comply with the my duties, and I am familiar with and acce 605, F.S. Or, if this document is being file that the limited liability company has been

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