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O SIMMONS

PAVESE LAW FIRM

CHRISTINA HARRIS SCHWINN

Direct Dial: (239) 336-6228 Email: ChristinaSchwinn@paveselaw.com

1833 Hendry Street, Fort Myers, Florida 33901 | P.O. Box 1507, Fort Myers, Florida 33902-1507 | (239) 334-2195 | Fax (239) 332-2243

February 13, 2018

Ms. Octavia L. Simmons Regulatory Specialist II Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Letter Number 718A00002178 3J & ASSOCIATES III LLC

Change of Registered Agent

Dear Ms. Simmons:

In response to your correspondence dated February 1, 2018 (copy enclosed), enclosed please find the following:

1. Statement of Change of Registered Office of Registered Agent or Both for Limited Liability Company.

If you require any further information, please do not hesitate to contact me.

Very truly yours,

Christina Harris Schwinn

CHS/ik

Enclosures (as stated)

cc: Client

RECEIVED

FEB 1 6 2018

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:3J & ASSOC	IATES I	III LLC
2	(a)	2323 Del Prado Blvd.	(b)	2323 Del Prado Blvd.
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (8)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 1-B	<u> </u>	Suite 1-B
		Cape Coral, FL 33990	<u> </u>	Cape Coral, FL 33990
			•	
		12/28/2016		L16000232709
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	Russell B. Reaves		
	` '	Registered Agent and Registered Office shown on the records of the	e Florida De	Dept. of State:
		2524 SW 30th Terrace		一
		Registered Office Address (MUST BE FLORIDA STREET AD	DDRESS)	4 4 4 5
		Cape Coral ,FL_	33914	<u>4</u>
				5
	(b)	PLF Registered Agent, LLC		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Mice addre	<u>ess</u> :
		1833 Hendry Street	•	
		NEW Registered Office Address:		
		The Mark Mark Mark Mark Mark Mark Mark Mark		
		Fort Myers ,FL_	33901	
the	cha	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cless of organization or the operating agreement of the limited liability.	he register vility com	ered office and the business office of the registered
7-2	igna	ture of a member or authorized representative of a member	-	Printed or typed name of signee
pro the to i	ovisi obl mer tifica	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete paigntions of my position as registered agent as provided by reflect a change in the registered office address, I he is inswriting of this change.	e to act in erformand for in Cha erebysconf	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been
Sig	gnatti	re of Registered Agent		