L17000023085

(Requestor's Name)										
(Address)										
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(City/State/Zip/Phone #)										
(OR) Color (OR)										
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(Business Entity Name)										
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SECONDARY OF STATE

T. LEMEUX

COVER LETTER

	Registration Section Division of Corporations	•						
CHDICA	Janet Ogburn LLC							
SUBJE		d Lia	bility Company					
Dear Sir	or Madam:							
The encl	losed Registered Agent/Registered Off	ice Change	and fo	ee(s) are submitted for filing.				
Please re	eturn all correspondence concerning th	is matter to	the fo	ollowing:				
Yasmir	n Wardie Adamy, Esq.							
	Name of Person		•	_				
Adamy	Law, PLLC							
	Firm/Company		<u>-</u>	_				
2850 ls	sabella Boulevard, Suite 10							
	Address			_				
Jackso	onville Beach, FL 32250							
	City/State and Zip Code			_				
yaz@a	damylaw.com							
Е-г	nail address: (to be used for future ann	nual report i	otific	ation)				
For furth	ner information concerning this matter.	, please call	:					
Yasmir	Wardie Adamy	904		947-4890				
		at (
	Name of Person			Area Code & Daytime Telephone Number				
9	STREET/COURIER ADDRESS:		MAI	ILING ADDRESS:				
l	Registration Section	stration Section						
	Division of Corporations		Division of Corporations					
	Clifton Building	Box 6327						
	2661 Executive Center Circle Fallahassee, Florida 32301		Talla	ahassee, Florida 32314				
1	Enclosed is a check for the following	amount:						
្រ	2 \$25 Filing Fee	C	\$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.

I. Na	une of the limited liability company:	n LLC						
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 14542 Marshview Drive	(14	ма 6 4542 Ма	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Marshview Drive			
	Jacksonville Beach, FL 32250		Ja —	acksonvi	lle Bead	ch, FL	32250	
	January 30, 2017		L17	7000023	3085			
	Date of filing/registration in Florida	4.			Ocument	number	•	
. (a)	Registered Agent and Registered Office shown on the records of United States Corporation Agents, Inc. Registered Office Address (MUST BE FLORIDA STREET)			ot, of State;				
	13302 Winding Oak Court	00046						
	Tampa	33612 L	<u>-</u>			17W	2019	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	4.005	4.1			AHAS	MAR	
	Adamy Law, PLLC	. -				RY OF	<u>∞</u> ∃	
	NEW Registered Office Address: 2850 Isabella Boulevard, Suite 10					LACTARY OF STATE LAHASSEE, FLORIDA	± 2	٠٠٠ فريد
	Jacksonville Beach	32250)					
ne chai gent w vas/we ne artic	mited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of organization or the operating agreement of the	f the regi iability coof the ling Imited	istere ompa nited liabil	d office a any, it is h liability o	nd the butereby concompany	isiness o nfirmed	office of that the	the register change(s)
Signati	ure of a member or authorized representative of a member			P	rinted or ty	ped name	of signed	
rovisione obli o mere otified	ov accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to ac : perform :d for in hereby c	et in te nance Chap eonfir	his capac of my du ster 605, I om that the	ity. I furt ties, and F.S. Or, i e limited	ther agre I am Jan I this do liability	ee to co niliar w ocument compai	mply with t ith and acc is being fil ny has been
\$18 (2/1	Division of Corporations • P.O. 1			allahasse	e, FL 32.	314		