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COVER LETTER

ŤO: Registration Section Division of Corporations					
SUBJECT: JASPER PROPERTY LLC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning th	nis matter to the following:				
Alyssa Getzoff					
Name of Person					
JASPER PROPERTY LLC					
Firm/Company					
301 W Platt St #88					
Address					
Tampa, FL 33606					
City/State and Zip Code					
alystassets@gmail.com					
E-mail address: (to be used for future ann	nual report notification)				
For further information concerning this matter,	, please call:				
Alyssa Getzoff	at (813) 401-7614				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following	g amount:				
	□ \$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 605.0114 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.

2. (a)	9/96 IASDED AVE		
(u)	8486 JASPER AVE	(b) 8486	JASPER AVE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville, FL 32211	Jackso	onville, FL 32211
	03/08/2017	L17000	0051090
i.	Date of filing/registration in Florida	4.	Document number
. (a)	NRAI SERVICES, INC		
. ()	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	of the Florida Dept. of S	State: .
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	- SEC
	PLANTATION , F	_L 33324	
(b)	Registered Agents Inc.		TLED 第 19 PL SEESEE
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:	FI 0
	3030 N. Rocky Point Dr.		H 3 33
	NEW Registered Office Address:		
	STE 150A		<u> </u>
	Tampa , F	33607	
ne chai gent w /as/we ne artic	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited I re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registered off liability company, i of the limited liabi	ice and the business office of the registered it is hereby confirmed that the change(s) lity company or as otherwise provided in company.
Signati	illiam M Sitton, Mg1 ure of a member or authorized representative of a member		Printed or typed name of signee
rovisio ne obli nere	y accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as providely reflect a change in the registered office address, I in writing of this change. Bill Havre - Assistat	gree to act in this co e performance of m ed for in Chapter 6 Thereby confirm the	apacity. I further agree to comply with the ny duties, and I am familiar with and accep, 05, F.S. Or, if this document is being filed at the limited liability company has been

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