11700075987

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



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11/15/17--01020--005 **25.00



COVER LETTER

TO: Registration Section Division of Corporations				
PawPlanet, LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
JBF Software Withholdings, LLC				
Name of Person				
PawPlanet, LLC				
Firm/Company				
3142 Glenridge Dr.				
Address				
Palm Harbor, FL 34711				
City/State and Zip Code	2			
pawplanetllc@gmail.com				
E-mail address: (to be used for future a	annual report notification)			
For further information concerning this matt	ter, please call:			
James Keating	940 535-8118			
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 amount:				
■ \$25 Filing Fee	☐ \$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.

1.	Name of the limited liability company: PawPlanet, I	LLC		
2. (a	3142 Glenridge Dr.	(b)		
(u	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Palm Harbor, FL 34685	<u> </u>		
	4/4/17	L1	7000075987	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	JBF Software Withholdings, LLC			
•	Registered Agent and Registered Office shown on the records o 3142 Glenridge Dr.	f the Florida De	ept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	tered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	Palm Harbor . F	L_34685	NOV 15 ANASSE	
(b	Enter name of NEW Registered Agent and/or NEW Registere			
	James Keating NEW Registered Office Address:			
	6686 Alisma Ln			
	Jacksonville, F	L_32244		
the c agen was/ othesia	elimited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members rainles of organization or the operating agreement of the	of the register liability comp of the limited	red office and the business office of the registered pany, it is hereby confirmed that the change(s) id liability company or as otherwise provided in	
	teating	James	s Keating	
I her prove the o to me onatif	posserum a member or authorized representative of a member reby accept the appointment as registered agent and agistions of all statutes relative to the proper and complet bligations of my position as registered agent as provide the property of the property of the property reflect a change in the registered office address, and writing of this change.	gree to act in le performanc led for in Cha I hereby conf,	Printed or typed name of signee this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been	
	भारतन्त्र्राहित्रहांstered Agent			