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J. LEGGETT

18 JAN 17 MH 10: 40

COVER LETTER

TO: Registration Section Division of Corporations		
JW Melons SUBJECT:		
Name	of Limited L	liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	e Change and	d fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the	e following;
Joshua David Williams		
Name of Person		 -
JW Melons		
Firm/Company		
111 Hickory Tree Rd.		
Address		
Longwood, FL 32750		
City/State and Zip Code		
jwmelons@gmail.com		
E-mail address: (to be used for future annua	al report noti	fication)
For further information concerning this matter, p	lease call:	
Joshua Williams	407	256 6430
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 a	mount:	
☑ \$25 Filing Fee	□ \$	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.

1. N	ame of the limited liability company:			
2. (a)	111 Hickory Tree Rd	(b) 111 Hick	ory Tree Rd	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1
	Longwood, FL 32750	Longwoo	d FL, 32750	
	04/06/2017	L1700007	7823	
 (a) 	Date of filing/registration in Florida Joshua D Williams	4.	Document number	
2. (4	Registered Agent and Registered Office shown on the records of 497 Homer Ave.	the Florida Dept, of State		
	Registered Office Address (MUST BE FLORID A STREET) Longwood, FL 32750	(DDRESS)	- ALLAND THE	
	FL	·	5 A	
(b)	Joshua D Williams			
(,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	EL - 20 40	
	111 Hickory Tree Rd.		. 6	
	NEW Registered Office Address:			
	Longwood, FL 32750			
	, FL	·		
the ch agent was/w	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered office ability company, it is of the limited liability	and the business office of the registe hereby confirmed that the change(s) company or as otherwise provided in pany.	rec
Sign	ture of member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mer	the accept the appointment as registered agent and agrious of all statutes relative to the proper and complete ligations of my position as registered agent as provide selv reflect a change in the registered office address, I in writing of this change.	ee to act in this capa performance of my a d for in Chapter 605, hereby confirm that t	city. I further agree to comply with a uties, and I am familiar with and acc F.S. Or, if this document is being fil he limited liability company has been	he ep 'ed
	Division of Corporations P.O. I	Box 6327• Tallahass	see, F1. 32314	

FHANG FEE: \$25.00

INHS18 (2/14)