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IALLAHASSEL FLORIOZ

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Joseph John March

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: JMH & PH, LLC					
Nan	ie of Limited I	Liability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	ice Change an	d fee(s) are submitted for filing.			
Please return all correspondence concerning th	is matter to the	e following:			
Pike Hall, III					
Name of Person					
JMH & PH, LLC					
Firm/Company					
PO Box 3495					
Address					
Ponte Vedra Beach, FL 32004			ÍALL	2016 JUL 26	
City/State and Zip Code			AR. Est		
pike@pikehall.com			HASSET		רר
E-mail address: (to be used for future ann	ual report noti	fication)	*		ָ ֓֞֞֞֞֞֞֞֩֞֞֞֩֞֞֞֩֞֞֩֞֞֩֞֩
For further information concerning this matter,	please call:		oalo;	21:0:12	`
Pike Hall	904 at (993-6549			
Name of Person		Area Code & Daytime Telepho	ne Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. Florida 32301	R D P.	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314			
Enclosed is a check for the following	amount:				
■ \$25 Filing Fee	<u> </u>	555 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. Na	ame of the limited liability company:	_LC					
2. (a)		(b)					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	, , , , , , , , , , , , , , , , , , ,	Mailing address of limited liab (Note: MAY BE POST OF	ility company:			
	176 Muirfield Drive	PO	Box 3495	3495			
	Ponte Vedra, FL 32082	Por	nte Vedra, FL 32004				
	4/11/2017	L170	000081484				
3.	Date of filing/registration in Florida	4.	Document number				
5. (a)	Pike Hall, III						
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept.	of State:				
	Registered Office Address (MUST BE FLORIDA STREET) 176 Muirfield Drive	(ADDRESS)					
	Ponte Vedra, FL	32082					
(b)	Pike Hall, IV Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	ALLAHASSI				
	NEW Registered Office Address:			<u>.</u>			
	176 Muirfield Drive		TELFLORID,	- 3 D			
	Ponte Vedra, F	L_32082		· <u>~</u>			
the cha agent v was/we the arti Signat I herel provisi the obli- to merce	imited 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 lever authorized by an affirmative vote of the members cles of organization or the operating agreement of the large of a member or authorized representative of a member obvious of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, let in writing of this change.	of the registered liability compan of the limited liability elimited liability.	office and the business office by, it is hereby confirmed that the iability company or as otherwise company. Pike Hall III Printed or typed name of significations.	of the registered he change(s) se provided in			
Signatur	re of Registered Agent						