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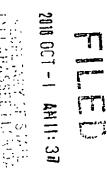
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PICK-UP WAIT MAIL								
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2075 TO

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>S-FD Jax, LLC</u> Na	ame of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
Kathy Moro		
Name of Person		
Frank Weinberg Black, P.L. Firm/Company		
7805 SW 6th Court		2010 GCT
Address		- 64 <u>+</u>
Plantation, FL 33324 City/State and Zip Code		MH II: 37
<u>Lynda, Watkins@Stiles.com_KMoro@fwblaw.net</u> E-mail address: (to be used for future ar	inual report notification)	3
For further information concerning this matte	r, please call:	
Lynda Watkins	at (954) 627-9350	
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 followin	g amount:	
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHFOR 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	me of the limited liability company: <u>S</u>	5-FD Jax, LLC						
2.	(a)	ATTN: Lynda Watkins		_ (b) <u>S</u> A	AME				
-	(17,2	Principal office address of limited liabil (Note: MUST BE STREET ADD 301 E LAS OLAS BLVD		Mailin	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		FT. LAUDERDALE, FL 33301			-				
		04/19/2017			L170000	087512			
3.		Date of filing/registration in F	lorida	4.	Doci	ument number			
5.	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1201 HAYS STREET								
		Registered Office Address (MUST BE FLC	ORIDA STREETA	DDRESS)				2	
		TALLAHASSEE	, FL_	32301				2018 OC	-17
	(b)	FRANK WEINBERG & BLACK P.L.					H253	-	Largae.
	Enter name of NEW Registered Agent and/or NEW Registered			Office address:			1.44	37~	17-23-4
		7805 SW 6th Court		<u> </u>			75.5	# ::	*********
		NEW Registered Office Address:					:	ယ္	A. 1 * ·
		C/O DAVID BLACK, ESQ.					: • '	2 3	
		PLANTATION	FL	33324					
the ag wa	e cha ent v is/we	mited liability company is not organize nge or changes are made, the Florida st vill be identical. Or, in the case of a Flo- tre authorized by an affirmative vote of cles of organization or the operating ag	reet address of trida limited liab	the registered oility compar I the limited	d office and ny, it is herel liability com	the business of by confirmed to pany or as oth	ffice of hat the	the re	gistered e(s)
_	Signal	ure of a member or authorized representative of	a member		Print	ed or typed name	of signe	:	
	`	by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered agive reflect a change in the registered off in writing of this change.	l agent and agre and complete pent as providea fice address, I h	ee to act in the performance for in Chap ereby confiri	ns capacity. of my duties ter 605, F.S. m that the lin	I further agree , and I am Jam Or, if this doc nited liability o	e to con niliar w. cument i compan	iply w ith and is bein y has	ith the d accept ig filed been