117000161599

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



100331600101

07/05/19- 01010 -001 4:01.00

2019 JUL -5 AH 3: 44

Y SULKER JUL 1 7 2019

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	PJF Holdings, LLC Name of Limited Liability Company						
SUBJECT							
Dear Sir or M	adam:						
The enclosed	Registered Agent/Registered Off	ice Change	and fee((s) are submitted for filing.			
Please return	all correspondence concerning th	is matter to	the follo	owing:			
Kimberly E.	. Lorenz, Esquire						
	Name of Person		·				
Davey Law	Group, PA						
	Firm/Company						
341 N. Mait	tland Ave., Suite 280						
 	Address						
Maitland, F	L 32751						
	City/State and Zip Code						
klorenz@da	aveylg.com						
E-mail a	iddress: (to be used for future and	iual report r	otificat	ion)			
For further in	formation concerning this matter	, please call	:				
Kimberly E.	. Lorenz	407	١	645-4833			
	Name of Person		/ A	rea Code & Daytime Telephone Number			
Regis Divis Clifte 2661 Talla	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301		Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314			
	osed is a check for the following						
☑ \$2	5 Filing Fee		□ \$55 F	iling 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.

L N	ame of the limited liability company: PJF Holdings,	LLC			
2. (a)	Peter Franzese	(Ъ)		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- \	, <u>.</u>	Mailing address of limited (Note: MAY BE POST	liability company:
	2933 Enterprise Road		2933 En	nterprise Road	
	DeBary, FL 32713	DeBary		FL 32713	
	July 28, 2017		L100016	1599	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Orlando Legal				
	Registered Agent and Registered Office shown on the records of the Kimberly E. Lorenz, Esquire	he Florid	da Dept. of Stat	 de:	
	Registered Office Address (MUST BE FLORIDA STREET A	-	_		
	800 N. Magnolia Avenue, Suite 1500		18 18 18 18 18 18 18 18 18 18 18 18 18 1		
	Debary, FL 32713			_	
(b)	Kimberly E. Lorenz, Esquire Enter name of NEW Registered Agent and/or NEW Registered			-	2019 JUL -5 MM 9: 25
	Davey Law Group, PA		W C		
	NEW Registered Office Address:				
	341 N. Maitland Avenue, Suite 280			_	
	Maitland,	32751	l 	_	
the chagent was/w the art Signa I here provise the obto mer	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this clique.	the reg bility of the lin limited 	istered office company, it is mited liability liability con	e and the business offices hereby confirmed the ty company or as other inpany. Printed or typed name of pacity. I further agree	ice of the registered at the change(s) wise provided in signer
ខ្លះនិប្រព្	are of Registered Agen.				

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