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(Re	equestor's Name)					
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TSCHROEDER

COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	JID Services LLC					
Name of Limited Liability Company						
Dear Sir	or Madam:					
The encl	osed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning thi	s matter to the	following:			
Jorge I	Diaz					
	Name of Person		_			
JID Se	rvices LLC					
	Firm/Company					
5036 V	V Flagler Str Apto I					
	Address					
Miami I	Florida, 33134					
	City/State and Zip Code					
jorged1	1372@gmail.com					
E-n	nail address: (to be used for future ann	ual report noti	fication)			
For furth	er information concerning this matter,	please call:				
Dayle N	Marante	786	5324228			
	Name of Person		Area Code & Daytime Telephone Number			
F [(2	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, Florida 32301	Re Di P.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
	Enclosed is a check for the following	amount:				
4	\$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. Na	me of the limited liability company: JID Services L			
2. (a)	5036 W Flagler Str Apto I			
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami Florida		Miami F	lorida
	33134	_	33134	
	10/13/2017		L170002	12416
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)	Corporate Creations Network Inc.			
J. (u)	Registered Agent and Registered Office shown on the records of the	he Florid	a Dept. of Stat	ee:
	11380 Prosperity Farms Road			
	Registered Office Address (MUST BE FLORIDA STREET A Suiete #221E	DDRES	<u>s)</u>	19 OCT
	Palm Beach Gardens , FL	33410) .	CT 28
(b)	Jorge Diaz			
, ,	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ldr <u>ess</u> :	
	5036 W Flagler Str Apto I			50 50
	NEW Registered Office Address:			_
	Miami . FL	33134		
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg bility c f the lir	istered offic ompany, it i nited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
		Jo	rge I Diaz	
Signa	ture of a member pr authorized representative of a member			Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change.	ee to ac perforn l for in pereby c	t in this cap nance of my Chapter 60, confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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

Signature of Registered Agent