Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_



## LLC REGISTERED AGENT CHANGE JD CONSTRUCTION TEAM, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help OCT 30 2023

## 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:	JCTION TEAM, LLC	
2. (a)		(b)	
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	10/25/17	L170002	
3.	Date of filing/registration in Florida	4.	Document number
5. (a	LAW OFFICES OF ANTHONY L. TRULLENQUE		
	Registered Agent and Registered Office shown on the record		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	7098 BONITA DRIVE		
	MIAMI BEACH	<sub>C1</sub> 33141	20
	MIAMI BEACH	, r.L	2023 OCT 27
(b)	Registered Agents Inc		CT F
	Enter name of NEW Registered Agent and/or NEW Register	ered Office address:	- 27 電話
	7901 4th St N		PR DOWN
	NEW Registered Office Address:		— · မွ
	STE 300		. 3 . 6
	St. Petersburg	FL_33702	
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limiterere authorized by an affirmative vote of the membericles of organization or the operating agreement of	s of the registered of d liability company, i ers of the limited liab	fice and the business office of the registered it is hereby confirmed that the change(s) fitty company or as otherwise provided in
Sign	iture of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob to mer notifie	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as provely reflect a change in the registered office address of in writing of this change.	lete performance of n ided för in Chapter (	apacity. I further agree to comply with the iv duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed