117000247154

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SEP 25 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: C2JA, LLC. Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Jili Anderson Name of Person	
Firm/Company	
529 Clayton St.	
Orlando FL 32804 City/State and Zip Code	· ·
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Jii Anderson at (321) 945 - 7098 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 following amount	nt:
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	
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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. Nai	ne of the limited liability company: <u>CZJA</u> , <u>LLC</u>
2. (a)	755 Ellwood Ave (b) 755 Ellwood Ave.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orlando, Fr 32804 Orlando, Fr 32804
	<u> </u>
3.	12/4/2017 L17000247154 Date of filing/registration in Florida 4. Document number
5. (a)	United States Corporation Agents uns.
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE ELORIDA STREET ADDRESS)
	Tampa, FL 33612
(b)	Jill Anderson
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	529 chyton St.
	NEW Registered Office Address:
	Oriendo Fr 32804
	. FL
the char agent w was/we	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after age or changes are made, the Florida street address of the registered office and the business office of the registered ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the organization or the operating agreement of the limited liability company.
ine artic	Smarch Jul Anderson
Signad	'
provision the oblication to mere	v accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in the property of this change.
Signatur	e of Registered Agent