11800000 6572

(Requestor's Name)						
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(Address)						
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JUN 07 2019

D CUSHING

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	SHELTZ REALTY, LLC					
Name of Limited Liability Company						
Dear S	Sir or Madam:					
The en	aclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the following:				
JUDI	TH H. HILL, EA					
	Name of Person					
J. H.	HILL, INC.					
	Firm/Company					
6999	02 MERRILL RD, STE 280					
	Address					
JACK	SONVILLE, FL 32277					
	City/State and Zip Code					
judy_	hill@comcast.net					
E	-mail address: (to be used for future ann	ual report notification)				
For fur	ther information concerning this matter,	please call:				
JUDI	TH H. HILL, EA	904 855-1140				
	Name of Person	Area Code & Daytime Telephone N	umber			
	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:						
	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INHS1	8 (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: SHELTZ REA	ALIY, LL	.C	
2. (a)	110 KNOTTY PINE TRAIL	(b)	SAME A	S PRINCIPAL OFC ADDRESS
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		PONTE VEDRA BEACH, FL 32082	_		
		JANUARY 08, 2018	 	1800000	6572
 3. 5. 	(a)	Date of filing/registration in Florida SEAN MASON	4.		Document number
J. (u)		Registered Agent and Registered Office shown on the records of the Florida Dept. of State 330 A1A N			:
		Registered Office Address (MUST BE FLORIDA STREET) 323	ADDRESS)		
		PONTE VEDRA BEACH FL	32082		2
(b)	JUDITH H. HILL, EA Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	
		6999-02 MERRILL RD			- · · · · · · · · · · · · · · · · · · ·
		NEW Registered Office Address: PMB 290			
		JACKSONVILLE , FL	32277		ż
the d ager was	cha: it w /we	mited liability company is not organized under the lavinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liar authorized by an affirmative vote of the members of the organization or the operating agreement of the	the regis ability con of the limi limited li	ered office npany, it is ted liability ability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Sig	gnati	ure of a member or authorized representative of a member			Printed or typed name of signee
prov the to to m notij	risio obli ere fied	y accept the appointment as registered agent and agrous of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I is in writing of this change.	ee to act performa d for in C hereby co	in this capa nce of my a hapter 605, nfirm that t	city. I further agree to comply with the httes, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been