

L18000056310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

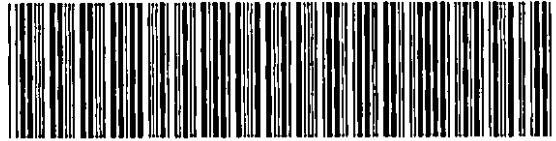
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke to Michael Jenner
who gave permission to
complete 5(a).

Office Use Only



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2018

MICHAEL JENNER
1401 BRICKELL AVE
STE 320
MIAMI, FL 33131

SUBJECT: EMJAY CAPITAL LLC
Ref. Number: L18000056310

We have received your document for EMJAY CAPITAL LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Complete application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 518A00012972

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMJAY CAPITAL LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Jenner

Name of Person

EMJAY GROUP LLC

Firm/Company

1401 Brickell Ave, Ste 320

Address

Miami, FL 33131

City/State and Zip Code

mike@emjay.group

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Jenner at (305) 218.3704

Name of Person

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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: EMJAY CAPITAL LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. _____ 4. L18000056310
Date of filing/registration in Florida Document number

5. (a) Emjay Group LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1110 Brickell Ave
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Ste 200
Miami, FL 33131

(b) EMJAY GROUP LLC
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1401 Brickell Ave
NEW Registered Office Address:
Ste 320
Miami, FL 33131

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member Michael Jenner

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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