## L18000 060 150

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		lal_		

Office Use Only



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NOV 12 2019 S. MODOS S. YOUNG



October 29, 2019

TAMARA HERNANDEZ RUSH BOOKKEEPING & NOTARIES SERVICES 142 NAOMO RD ORLANDO, FL 32828

SUBJECT: H&J ENTERPRISE LLC Ref. Number: L18000060150

We have received your document for H&J ENTERPRISE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Letter Number: 819A00022284

Shelia H Young Regulatory Specialist II

## **COVER LETTER**

TO: Registration Section Division of Corporations				
H & J Enterprise LLC SUBJECT:				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	r to the following:			
Tamara Hernandez				
Name of Person	<del></del>			
Rush Bookkeeping & Notaries Services LLC				
Firm/Company	<del></del>			
142 Naomi Rd				
Address				
Orlando FL,32828				
City/State and Zip Code	<del></del>			
bookkeeping.notaryexpress@gmail.com				
E-mail address: (to be used for future annual repo	ort notification)			
For further information concerning this matter, please	call:			
Tamara Hernandez 4	.07 223-8988			
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.

	ame of the limited liability company: 4000 Old Winter Garden Rd	4	4000 Old Winter Garden Rd
2. (a)	Principal office address of limited liability company:	(b) _	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	Orlando FL 32805		Orlando FL 32805
	03/07/2018	 L1	18000060150
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	)		
J. (u,	Registered Agent and Registered Office shown on the records of		ept. of State:
	Elssy Montero		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	·
	4000 Old Winter Garden Rd		
	Orlando	32805	
	, rı	- <del></del>	
(b)			
(-)	Enter name of NEW Registered Agent and/or NEW Registered	l Office addre	<del></del>
	John P Saunders		
	NEW Registered Office Address:		ED 22
	4000 Old Winter Garden Rd		
	Orlando	32805	-•
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members dicles of organization or the operating agreement of the	f the registe iability com of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	MATO)		do Montero
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei	eby accept the appointment as registered agent and ag tions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing afthis change	r performan	ce of my duties, and I am familiar with and accept
C:	ure of Registered-Agent		