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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Jennifer L. Codding, 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:
Starlett M. Massey Name of Person
Massey Law Group, P. A. Firm/Company
76 4th Street, # 262 Address
Saint Petersburg, FL 33731 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Starle H MASSEY at (866) 225-3654 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
INHS18 (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.

I. Na	me of the limited liability company: Jennifer L. Codding, LLC.
2. (a)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	5641 IST Avenue North 5641 IST Avenue North
	Saint Refersburg, PL 33710 Saint Refersburg, FL 33710
3.	03/19/30/9 L18000070953 Date of filing/registration in Florida 4. Document number
5. (a)	MUSSEY LAW GYDUP, P. A. Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	4401 W. Hennedy Blvd., Suite 201
	70m00 = 32609
(b) .	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	hinter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	76 4th Street, #262
	Saint Petasburg FL 33731
the char agent w was/wei	nited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ge 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) the authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
me arne	les of organization or the operating agreement of the limited liability company.
Signatu	re of a member of authorized representative of a member Ten for Codding Printed or typed name of signee
provisio the oblig to merel	coccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept tations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed y reflect a change in the registered office address, I hereby confirm that the limited liability company has been in writing of this change.
Signature	tri Registered Agent

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