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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

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**LLC REGISTERED AGENT CHANGE  
KING JAX FL, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

DEC 20  
J. PRATHER

# 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: King Jax FL, LLC
2. (a) 1920 Adelia St., #300  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Nashville, Tennessee 37212
- (b) 1920 Adelia St., #300  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Nashville, Tennessee 37212
3. 04/02/2018  
Date of filing/registration in Florida
4. L18000083695  
Document number
5. (a) SCHILLING, ROSS  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
501 BEACH RD.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SARASOTA, FL 34242
- (b) eResidentAgent, Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
11380 Prosperity Farms Road #221E  
NEW Registered Office Address:  
Palm Beach Gardens, FL 33410

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]  
Signature of a member or authorized representative of a member

Erika A. Easter, Authorized Person

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]  
Signature of Registered Agent

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

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