# L18000133460

| (Re                                     | equestor's Name)   |           |  |  |
|---|--------------------|-----------|--|--|
| (Address)                               |                    |           |  |  |
| (Ac                                     | idress)            |           |  |  |
| (Cir                                    | ty/State/Zip/Phone | #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL      |  |  |
| (Bi                                     | siness Entity Nam  | ne)       |  |  |
| (Document Number)                       |                    |           |  |  |
| Certified Copies                        | _ Certificates     | of Status |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |
|   |                    |           |  |  |
|   |                    |           |  |  |
|   |                    |           |  |  |
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## WALK IN

PICK UP: **BROOK 9/27 CERTIFIED COPY** XX**PHOTOCOPY** GS XX**FILING** STATEMENT OF CHANGE 1. LLOYD JONES LLC (CORPORATE NAME AND DOCUMENT #) 2. (CORPORATE NAME AND DOCUMENT #) 3. (CORPORATE NAME AND DOCUMENT #) SPECIAL INSTRUCTIONS:

### **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |
|--|--|
| SUBJECT: Lloyd Jones LLC   |  |
|  | Name of Limited Liability Company  |
| Dear Sir or Madam:   |  |
| The enclosed Registered Agent/Register   | red Office Change and fee(s) are submitted for filing.   |
| Please return all correspondence concerr   | ning this matter to the following:   |
|  | <del></del>  |
| Name of Person   | 1  |
| Firm/Company   |  |
| Address  |  |
| City/State and Zip (   | Code   |
| E-mail address: (to be used for futu   | ure annual report notification)  |
| For further information concerning this i  | matter, please call:   |
| Name of Person   | at () Area Code & Daytime Telephone Number   |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| Enclosed is a check for the foll-  | owing 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.

| <u>'</u> | 00 Crescent Court, Suite 700   | (b) 100 Crescent Court, Suite 700 |   |
|----------|--|-----------------------------------|---|
|          | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  |                                   | Mailing address of limited liability compan<br>(Note: MAY BE POST OFFICE BOX) |
| -        | Dallas, TX 75201   | Dailas                            | s, TX 75201   |
| 0        | 05/30/2018   |                                   | 0133460   |
| _        | Date of filing/registration in Florida   |                                   | Document number   |
| -<br>-   | Registered Agent and Registered Office shown on the records of Lloyd Jones LLC  Registered Office Address (MUST BE FLORIDA STREET)  1102 A1A N STE 206  PONTE VEDRA BEACH . FI | 32082                             | 2023 SEP 27 AM 11: 29  SEP 27 AM 11: 29  TALLAHASSEE, FLORID                  |
| (        | CCS Global Solutions, Inc.   |                                   | 1E<br>1DA   |
| _        | NEW Registered Office Address:   |                                   | <del></del>   |
| _        | 155 Office Plaza Drive, 1st Floor  | _                                 |   |
|          | Tallahassee  | 32301                             |   |

of organization of the operating agreement of the limited liability company.

| /s/ Jason Tennenbaum   | Jason Tennenbaum                |
|--|---------------------------------|
| Signature of a member or authorized representative of a member | Printed or typed name of signed |

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.

/s/ Joanne Caswell

**Assistant Secretary** 

Signature of Registered Agent