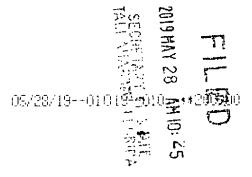
## 118000137063

(Requestor's	s Name)			
(Address)				
(Address)				
(City/State/2	Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business E	ntity Name)			
(Document Number)				
Certified Copies C	ertificates of Status			
Special Instructions to Filing O	fficer:			

Office Use Only



500329407805



Y SULKER
JUN 1 2 2019

## COVER LETTER

**TO:** Registration Section

Divi	sion of Corporations					
SUBJECT:	3824 JOHNSON STREET LLC					
SOBSECT.	Name of Limited Liability Company					
Dear Sir or M	Madam:					
The enclosed	d Registered Agent/Registered Of	fice Change and fe	ee(s) are submitted for filing.			
Please return	all correspondence concerning th	nis matter to the fo	llowing:			
VERONIC	A ANDERSON					
	Name of Person		-			
ANDERSO	ON AND ASSOCIATES, P.A					
	Firm/Company		-			
225 N. FR	ENCH AVENUE					
	Address		-			
SANFORE	O, FL 32771					
	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	-			
VERONIC	A@CONSULTLAWOFFICE	СОМ				
E-mail	address: (to be used for future and	ual report notifica	ation)			
For further it	nformation concerning this matter	. please call:				
VERONIC	A ANDERSON	407 at (	843-9901			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divi: Clift 2661	SEET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Regi: Divis P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Encl	losed is a check for the following	amount:				
<b>☑</b> \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy			
INHS18 (2/14	)					

## STÅTEMENT 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. N	ame of the limited liability company: 3824 JC	HNSON STE	REET LLC	)			
,	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	my:	,	lailing address of lit  (Note: MAYBE F	mited Ital	bility co	mpanyt
	2122 PIEDMONT STREET		2122 PIE	EDMONT STREET			
	ORLANDO, FL 32805		ORLAND	OO, FL 32805			
	06/01/2018	i	L1800013	37063			
3.	Date of filing/registration in Florida	4.	·	Document numb	er —		
5. (a)							
(,	Registered Agent and Registered Office shown on the reco	ords of the Florida	Dept. of State	:			
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)			₹	2	
	2122 PIEDMONT ST					2019 MAY	
	ORLANDO	32805				MAY 2	
(b)					44	$\infty$	
(0)	Enter name of NEW Registered Agent and/or NEW Reg	istered Office add	ress:			:0 HV	Ö
	Anderson and Associates, P.A.					25	
	NEW Registered Office Address:						
	225 N. French Ave.						
	Sanford	FL. 32771					
agent v was/we the arti	imited liability company is not organized under tange or changes are made, the Florida street addressed or changes are made, the Florida street addressed by an aftermative vote of the memicles of organization on the operating agreement of the member of a mem	ess of the regist ited liability cor bers of the limi of the limited lia Andi	ered office npany, it is ted liability ability compressions	and the business hereby confirme company or as opany.  Printed or typed name	s office ed that to therwi	of the he cha se prov	registered nge(s) vided in
the obl to meri	by accept the appointment as registered agent an ions of all statutes relative to the proper and com- igations of my position as registered agent as pr ely reflect a change in the registered office addre d in writing of this change.	id agree to act i iplete performa ovided for in Ci iss, Thereby coi	in this capa nee of my d hapter 605, yfirm that th	city. I further as uties, and I am fi F.S. Or, if this a he limited liabili	gree to amiliar docume ty comp	comply with a ent is b oany he	with the nd accept eing filed is been
Signatu	re of Registered Agent	_					

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