

L18000180157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

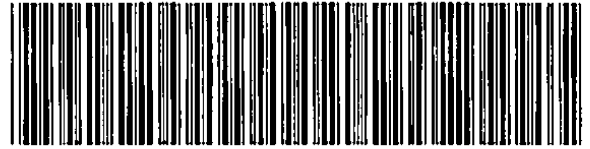
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100319192501

10/05/18--01006--014 **25.00

FILED

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TFJ INVESTMENTS, 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:

Tanna W. Jones

Name of Person

TFJ INVESTMENTS, LLC

Firm/Company

4137 Alesbury Drive

Address

Jacksonville, Florida 32224

City/State and Zip Code

Tannawj@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas F. Jones

904

516-7101

at ()

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

FILED
MAY 5 10 13 AM '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.

1. Name of the limited liability company: TFJ INVESTMENTS, LLC
2. (a) 4137 Alesbury Drive
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Jacksonville
FL 32224
- (b) 4137 Alesbury Drive
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Jacksonville
FL 32224
3. 7/26/18 Date of filing/registration in Florida
4. L18000180157 Document number
5. (a) Thomas F Jones
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
4137 Alesbury Drive
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
4137 Alesbury Drive
Jacksonville, FL 32224
- (b) Tanna W. Jones
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:

FL

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.

Thomas F. Jones
Signature of a member or authorized representative of a member

Thomas F. Jones
Printed or typed name of signee

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.

Thomas F. Jones
Signature of Registered Agent

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