118000 200 354





000322453590

\$1/02/19--\$1007 -\$17 **++**25.00

) JAN -2 FN 5:49

O CHIMINONS

COVER LETTER

то:	Registration Section Division of Corporations							
SUBJ	Neumann Realty Referral G	roup						
	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.					
Please	return all correspondence concerning th	is matter to the	following:					
Chad	l Neumann							
	Name of Person							
Neumann Realty Referral Group LLC								
	Firm/Company							
1901	1st St N Unit 1405							
	Address							
Jacks	sonville Beach FL 32250							
	City/State and Zip Code							
chad	@nrcjax.com							
F	E-mail address: (to be used for future and	nual report noti	fication)					
For fu	rther information concerning this matter	. please call:						
Chad Neumann		904 at (705-1144					
•	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	R D P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314					
Enclosed is a check for the following amount:								
	☑ \$25 Filing Fee	<u> </u>	\$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

1. No	ame of the limited liability company: NEUMANN RE	ALTY	REFERR.	AL GROUP LLC	
2. (a)		(b)			
	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)		N	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1901 1st St. N APT 1405				
	Jacksonville Beach, FL 32250	- -			
	08/21/2018	i	1800020	0354	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	UNITED STATES CORPORATION AGENTS,	INC			
	Registered Agent and Registered Office shown on the records of the				
	Cheyenne Moseley				
	Registered Office Address (MUST BE FLORIDA STREET AL				
	13302 WINDING OAK COURT, SUITE A				
	Tampa FL3	3612		19	
	Chad Neumann			<u></u>	
	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	<u>ress</u> ;	1 152	
				7-07 08-2	
	Chad Neumann			द्ग	
	NEW Registered Office Address:			4.9	
	1901 1st St N APT 1405				
	JACKSONVILLE BEACH FL 3	2250			
the cha agent v was/wa	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	ne regis ility cou the limi mited li	ered office upany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
Signature of a member or authorized representative of a member			Printed or typed name of signee		
	by accept the appointment as registered agent and agree	i to act	in this cana	city. I further agree to comply with the	

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 of Registered Agent