## M8000209056

(Re	equestor's Name)				
(Ac	idress)				
(Ac	ddress)				
	ty/State/Zip/Phone #)				
(0)	tyrotaterzipir none #)				
PICK-UP	WAIT	MAIL			
(Bi	usiness Entity Name)				
(0.					
(D.	ocument Number)				
(DC	ocument Number)				
Certified Copies	_ Certificates of	Status			
Special Instructions to	Filing Officer:				
	J. HORNE				
MAR 1 7 2022					

Office Use Only



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2022 MAR TO AM 9: 30 SECRETARY OF STALL ARCASSEE, FIRST

## COVER LETTER :

TO:	Registration Section Division of Corporations	•	. •
SUBJE	CCT: J&F RENTAL PROPERTIES LLC	C	
	Name of I	imited	Liability Company
Dear Si	ir or Madam:		
The en	closed Registered Agent/Registered Office Ch	ange aı	nd fee(s) are submitted for filing.
Please	return all correspondence concerning this mat	ter to th	e following:
Vict	toria Padron		
-	Name of Person		
Zei	nBusiness Inc.		
	Firm/Company		
336	E. College Ave. Suite 301		
	Address		
Tall	ahassee, FL 32301		
	City/State and Zip Code		
fulf	fillment@zenbusiness.com		
E	-mail address: (to be used for future annual re	port no	tification)
For fur	ther information concerning this matter, pleas	e call:	
Vic	toria Padron at	( 844	) 493-6249
	Name of Person	<del></del>	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 following amou	ınt:	
	□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18	8 (2/14)		

## 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.

•			
Principal office addre ( <i>Note: MUST</i>		(b)	536 N THOMPSON ROAD
	ess of limited liability company:		Mailing address of limited liability company:
APOPKA, FL 32712	BE STREET ADDRESS		(Note: MAY BE POST OFFICE BOX)
			APOPKA, FL 32712
08/31/2018	egistration in Florida		L18000209056  Document number
Date of hing/r	egistration in Florida	4.	Document number
(a) REGISTERED AGENTS	5 INC		<del></del>
Registered Agent and Registe	ered Office shown on the records	s of the Florida Dept. o	of State:
7901_4TH_STREET_NOR	TH		
	(MUST BE FLORIDA STRE	ET ADDRESS)	
SUITE 300			
ST PETERSBURG		FL_33702	
(h)			<del>,</del>
(b) ZenRusiness Inc. Enter name of NEW Registe	ered Agent and/or NEW Registe		2022 MAR 10 SECRETARY ALLANDASSE
336 E. College Ave.			
NEW Registered Office Ad	dress:		
Suite 301			是 章 刀
	<del> </del>		
Tallahassee		FI 32301	ψ. ·
1 analiassee		, FL32301	<del></del>