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Florida Departmen**t o**t

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 : (307)200-2803 : (813)436-5206 Fax Number

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LLC REGISTERED AGENT CHANGE JT CAPE CORAL LLC

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1/2/2025 15:22 \$ PST . To. 18506176383 Page 2/2 Fax: 8134365206

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. N	ame of the limited liability company:	LLC					
2. (a)		(b)					
	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: M.(Y BE POST OFFICE BOX)				
	7901 4th St N STE 300	7901	7901 4th St N STE 300				
	St. Petersburg, FL 33702	St. Petersburg, FL 33702					
	12/21/18	L18000	292533				
3.	Date of filing/registration in Florida		Document n	umber			
5. (a	C T CORPORATION SYSTEM						
., (11	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	t State:				
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS)</u>					
	1200 SOUTH PINE ISLAND ROAD						
	PLANTATION	33324					
. 1- 1	Registered Agents Inc			27.	2025		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Otlice address:			JA	<u> 2</u> .	
	7901 4th Si N			F. 7.	2025 JAN -3	FILE AFRO AFRO	
	NEW Registered Office Address:			.,;	2	0)	
	STE 300				AM II: 0	C. .	
					<u> </u>		
	St. Petersburg	33702					
the changent was/w the art Signa I here provise the obto mer	limited liability company is not organized under the larging or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ligere authorized by an affirmative vote of the members of igles of organization or the operating agreement of the first of a member of authorized representative of a member of which are of a member of authorized representative of a member of a member of a member of all statutes relative to the proper and complete ligations of my position as registered agent as provide of verflect a change in the registered office address. If in writing of this change.	f the registered of ability company of the limited liability Robin Jones	office and the bus c, it is hereby confibility company of c company. Printed or type c canacity. I furth	iness of firmed the r as other	fice of hat the crivisc	f the registered e change(s) provided in	
4/3/2	David Roberts - Assistant S	ecretary					

Signature of Registered Agent