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Richard E. Jesmonth

Attorney at Law

P.O. Box 846 Pensacola, Florida 32591 Fla Bar No. 694428 Telephone: (850) 912-9491

jeslaw@rjesmonth.com

July 17, 2019

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

JDNT Gulf Breeze, LLC

Document No. L19000077312

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee of \$25 is submitted for filing herewith. Please return all correspondence concerning this matter to the following:

Falinda McClung Richard E. Jesmonth, Attorney P O Box 846 Pensacola, FL 32591

Please keep the email address currently on file for future annual report notification. For further information concerning this matter, please call the undersigned at the number above.

Thank you for your consideration.

Sincerely,

Falinda McClung

Secretary to Richard E. Jesmonth

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Enclosures

Roche\JDNTGB\FI Sec of State Ltr

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:	Gulf Breeze LLC
2. (a) 2001 W. Government St	(b) PO Box 487
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Pensacola, FL 32502	Gulf Breeze FL 32562
3/19/2019	L190000773/2
3. Date of filing/registration in Florida	4. Document number
5. (a) Corporation Service Comporation Service	ODRESS) 3 230 Office address:
If the limited liability company is not organized under the laws the change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited liab was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the limited liab signature of a member or authorized representative of a member. I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete positions of all statutes relative to the proper and complete position as registered agent as provided to merely reflect a change in the registered office address. The notifical in writing of this change. Signature of Registered Agent Division of Corporations P.O. Bo	s of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) the limited liability company or as otherwise provided in mited liability company. Tohn W. Roche Printed or typed name of signee to act in this capacity. I further agree to comply with the erformance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed ereby confirm that the limited liability company has been

FILING FEE: \$25.00

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