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T GLASS MAY 2 2 2019 FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED CHANGE OF AGENT FOR:

JELLY-SALMON JV CG LLC

PLEASE RETURN A STAMPED COPY

CK# 8235 FOR \$50.00 (\$25.00 for this filing)

THANK YOU!

2019 HAY 21 AM 9: 07

APPROVED AND FILED

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. Na	ame of the limited liability company: JELLY-SAI	LMON JV	CG LLC			
2. (a))			
• • •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•	N	Mailing address of (Note: MAY B.		
	8724 SW 72nd STREET, #211		8724 SW 72nd STREET, #211 MIAMI, FL 33173			1
	MIAMI, FL 33173					
	APRIL 5, 2019		L1900009	91999		
3.	Date of filing/registration in Florida	4.		Document nu	mber	_
5. (a)						
J. (u)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	- c :		
	COGENCY GLOBAL INC.					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		-	r -	s	
	115 NORTH CALHOUN ST. STE 4					<u> </u>
	TALLAHASSEE,	_{FL} 32301				APPI A Fi
(b)	Enter name of NEW Registered Agent and/or NEW Registe	red Office ad	dress:	-		AH C
						. ⊇
	ATRIUM REGISTERED AGENTS, INC.			_	• • •	7
	NEW Registered Office Address:					
	8950 S.W. 74TH CT. SUITE 1901			-		
	MIAMI,	FL 33156				
signe I here provis the obto mer notifie	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of a member by accept the appointment as registered agent and light in soft all statutes relative to the proper and compiling attended of my position as registered agent as provedly reflect a change in the registered office address of in writing of this change.	s of the regid liability or rs of the limited FE	stered office ompany, it is nited liability liability con LIPE FRIA	e and the busing shereby configure or nearly or nearly. AS, AUTH. Frinted or types arcity. I further	ness office of rmed that the as otherwise REPRESE diname of sign	of the registered the change(s) the provided in ENTATIVE
Signati	ire of Registered Agent					