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COVER LETTER

INHS18 (2/14)

то:	Registration Section Division of Corporations	•						
SUBJ	Just Amuse Me! Entertainment Group							
	Nai	ne of Limited	Liability Company					
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Of	fice Change a	nd fee(s) are submitted for filing.					
Please	return all correspondence concerning th	nis matter to th	ne following:					
David	d Perry Jr							
	Name of Person							
Just /	Amuse Me! Entertainment Group,	LLC.						
	Firm/Company							
36 NI	E 4th Street							
	Address	-						
Cryst	al River, FL. 34429							
	City/State and Zip Code							
Dave	.perry.jr@icloud.com							
ŀ	E-mail address: (to be used for future and	nual report no	tification)					
For fu	rther information concerning this matter	, please call:						
David	l Perry Jr	352	212-5518					
	Name of Person		Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:		MAILING ADDRESS:					
	Registration Section Division of Corporations		Registration Section Division of Corporations					
Clifton Building			P.O. Box 6327					
	2661 Executive Center Circle Tallahassee, Florida 32301	•	Tallahassee, Florida 32314					
	Enclosed is a check for the following amount:							
	☑ \$25 Filing Fee		☐ \$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. Na	ame of the limited liability company: Just Amuse M	le! Enter	tainment	Group
2. (a)	36 NE 4th Street	(b)	1129 E L	aSalle Street
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-)	M	ailing address of limited liability company. (Note: MAY BE POST OFFICE BOX)
	Crystal River, FL 34429		Hernando	o, FL 34442
	07-17-2019	L	19000174	4302
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	MEDRANO, ROBERT			
(,	Registered Agent and Registered Office shown on the records of t			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			20.
	3615 NE 207TH ST #3104			19 N
	Miami FL	33180		FIL SECRETARY - A
(b)	Mellisa Perry Enter name of NEW Registered Agent and/or NEW Registered Office address:			MI D: 50
	NEW Registered Office Address:			
	1896W Hialeah Dr.			
	Citrus Springs, FL	34434		
the cha agent v was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registed bility confirmed the limited liamited liamit	ered office pany, it is ed liability ability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	nture of a member or authorized representative of a member	David	d Perry Jr	Printed or typed name of signee
I here provis the obt to mer notifie	thy accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had a priving of this change.	performai Lför in Ch	n this capa ice of my d iapter 605,	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed