## 119000244339

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Gertified dopies
Special Instructions to Filing Officer:

Office Use Only

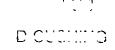


500337315275

11/25/19--01019--068 \*\*85.00

10 75. 55 1.07

RA Change



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT:LJZ GROUP LLC	
Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
LIDIA ZYSKOWSKI  Name of Person	
LJZ GROUP LLC Firm/Company	
2941 SE SOUTH LOOKOUT BWD Address	
FORT ST. LUCIE FL 34984  City/State and Zip Code	, , , , , , , , , , , , , , , , , , ,
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LIDIA ZYSIWWSKI at (56) 662960   Name of Person Area Code & Daytime Telephone Number	13. C3. C3. C3. C3. C3. C3. C3. C3. C3. C
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

☐ \$55 Filing Fee & Certified Copy

2415 N. Monroe Street, Suite 810

\$25 Filing Fee INHS18 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

Englosed is a check for the following amount:

## 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. Nan	me of the limited liability company: LJZ GROUP LLC	
2. (a) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability  (Note: MAY BE POST OFFICE  AND	<u>COUTBU</u>
	Date of filing/registration in Florida  REGISTERED AGENTS INC  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	139
(b) <u>.</u>	Registered Office Address  7901 4th STREET, SUITE 300  ST. PETERSBURG. FL 33702  LIDIA ZYSKOWSKI  Enter name of NEW Registered Agent and/or NEW Registered Office address:  2941 SE 30UTH LOOKOUT BWD  NEW Registered Office Address:	Darbas English
change of agent with was/were the articles Signature I hereby provision the obligation merely notified in the merely notified in the second se	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed or changes are made, the Florida street address of the registered office and the business office of the real being a street address of the registered office and the business office of the real being the interest of the limited liability company, it is hereby confirmed that the confirmation is a street and the members of the limited liability company or as otherwise personal companies of the limited liability company.  LIDIA ZYSKOW Printed or typed name of signed by accept the appointment as registered agent and agree to act in this capacity. I further agree to company of all statutes relative to the proper and complete performance of my duties, and I am familiar with gations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is the reflect a charge in the registered affice address, I hereby confirm that the limited liability company in writing of his change.	registered change(s) provided in SK/

pivision of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)