

L19000296327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

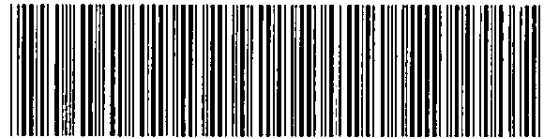
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500411101105

06/26/23--01008--007 \*\*35.00

FILED  
2023 JUN 26 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FL

AUG 14 2023

AUG 14 2023

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PAUL JOHN FUND, LLC  
Name of Corporation

**DOCUMENT NUMBER:** L19000296327

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL JOHN

Name of Contact Person

PAUL JOHN FUND, LLC

Firm/Company

2220 CLIMBING IVY DRIVE

Address

TAMPA, FL 33618

City/State and Zip Code

PAUL@THEPAUL.IN

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL JOHN

Name of Contact Person

at ( 813 ) 205-0710  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PAUL JOHN FUND LLC

2. The principal office address: 2220 CLIMBING IVY DRIVE  
TAMPA, FL 33618

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 12/2019 Document number: L19000296327

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

PAUL P. JOHN

2220 CLIMBING IVY DRIVE

P.O. Box NOT acceptable

TAMPA, FL 33618

FILED  
2023 JUN 26 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

PAUL P. JOHN

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

JUNE 22, 2023

Date \_\_\_\_\_

If signing on behalf of an entity:

Type of Printed Name

**\* \* \* FILING FEE: \$35.00 \* \* \***

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)