L20000000740

(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:						





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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations					
oun reer	J&G Sunshine Enterprise LLC					
SUBJECT:	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.			
Please return	all correspondence concerning thi	s matter to the	following:			
Jorin Dean O	uwinga					
	Name of Person					
J&G Sunshine	e Enterprise LLC					
	Firm/Company	· · · · · · · · · · · · · · · · · · ·	_			
13200 W New	vberry Rd Apt X136					
	Address					
Newberry, FL	. 32669	,				
	City/State and Zip Code	·.	_			
ouwingajor@						
E-mail	address: (to be used for future annual	ual report notif	ication)			
For further in	nformation concerning this matter,	please call:				
Jorin Ouwing	a	231 at (884-4484			
	Name of Person	(Area Code & Daytime Telephone Number			
Regi Divi P.O.	ling Address: istration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Encl	losed is a check for the following	amount:				
a \$2	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.

	ume of the limited liability company: J&G Sunshine Enterprise LLC		L&G Sunsh	nine Enterprise LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(ບ) (ປ	Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	13200 W Newberry Rd Apt X136		13200 W N	ewberry Rd Apt X136
	Newberry, FL 32669		Newberry,	FL 32669
	12/18/2019		L200000007	40
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)	LegalInc Corporate Services Inc			
5. (a)	Registered Agent and Registered Office shown on the records o	f the Floric	a Dept, of State	: :
	LegalInc Corporate Services Inc			10 E
	Registered Office Address (MUST BE FLORIDA STREET	TADDRES	<u>S)</u>	0201
	5237 Summerlin Commons, Suite 400			2020 DEC
	Fort Myers F	L_33907		8
(b)	Thomas Bates			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office a	ddress:	74 22 22 E
	Thomas Bates			
	NEW Registered Office Address:			•
	6401 Bridgeview Dr			
	Sebring , F	33876 L		
change agent v was/we the arti	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register liability c of the line limited	ed office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
L here.	by accept the appointment as registered agent and agens of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, h	gree to ac e perforn ed for in I hereby c	t in this capa nance of my a Chapter 605, confirm that t	icity. I further agree to comply with the

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

Signature of Registered Agent