L2000003714

(Requestor's Name)				
(Address)				
(Address)				
(Čı	ty/State/Zip/Phone #)			
PICK-UP	MAIL MAIL			
(Bu	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer				
	Umils			

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	01/29/2025					
	Cheyanne Davis	<u></u>				
Reference #	2634005					
		AJULES LLC				
	es of Incorporation/Authorization	on to Transact Business				
✓ Amendment						
Change of Agent						
Reinstatement						
Conv	rersion					
☐ Merger						
☐ Dissolution/Withdrawal						
Fictitious Name						
Other						
Authorized A	Amount: \$25.00	<u>.</u>				
Signature:	(Churre Paine					

F: 800.944.6607

COVER LETTER

то:		stration Section sion of Corporations						
SUBJE	ECT:	MAYAJULES LLC						
		Name of Limited Liability Company						
Dear Si	ir or A	ładam:						
The end	closec	Registered Agent/Registered O	ffice Char	ige ai	nd fee(s) are submitted for filing.			
Please 1	return	all correspondence concerning t	his matter	to th	ne following:			
DENI	ISE C	. MAROHL						
		Name of Person						
		Firm/Company						
1415 S	UNS	ET HARBOUR DRIVE, UNI	T 406					
		Address						
MIAM	LBE	ACH, FLORIDA, 33139						
		City/State and Zip Code						
JULES	S@M	AYAJULES.COM						
E-	-mail	address: (to be used for future a	ınual repo	rt no	tification)			
For furt	ther in	nformation concerning this matte	r, please o	:all:				
DENIS	SE C.	MAROHL	at (_	702) 493-5566			
		Name of Person			Area Code & Daytime Telephone Number			
	Mai	ling Address:			Street Address:			
		stration Section			Registration Section			
		sion of Corporations			Division of Corporations			
		Box 6327			The Centre of Tallahassee			
	Tall	ahassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Encl	osed is a check for the followin	ng amoun	t:				
		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.

L N	ame of the limited liability company: MAYAJULES	LLC		<u> </u>
2. (a)	3921 ALTON ROAD	(b) 3921 ALTON ROAD		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI BEACH		МІАМІ	BEACH, SUITE 361
	FLORIDA 33140	_	FLORID	A 33140
	12/22/2010		1.200000	02714
3.	Date of filing/registration in Florida	- 4.	L200000	Document number
	OMBLE INC. L.C.			
5. (a)	Registered Agent and Registered Office shown on the records of	the Florid	la Dept, of Stat	_ e:
			•	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>S)</u>	12. E. S.
	244 BISCAYNE BLVD, 3505			
	ALLANII	22122		- - 30 °
	MIAMI , FL	33132	<u>. </u>	- · · · · · · · · · · · · · · · · · · ·
(b)	DENISE C. MAROHL			ે લું છુ
ζ-7	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ddress:	06
	1415 SUNSET HARBOUR DRIVE			<i>;</i>
	NEW Registered Office Address:			_
	UNIT 406			
	CNIT 400			_
	MIAMI BEACH , FL	33139	9	_
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register bility co f the lin	ed office an ompany, it i nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in appany.
	Denise C Marold			Denise C Marohl
_	nuire of a member or authorized representative of a member			Printed or typed name of signee
I here provis the ob to mer notifie	by accept the appointment as registered agent and agrions 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 in writing of this change.	ee to ac perform I for in s ereby c	t in this cap vance of my Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept b, F.S. Or, if this document is being filed the limited liability company has been
	Denise (Mardul			
Signati	are of Registered Agent			