

L20 0000047918

(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



900341510519

03/02/20--01011--018 **25.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 MAR -2 PM 2:48

FILED

MAR 21 2020

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jewell Consulting Services, 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:

Areaka Jewell

Name of Person

Jewell Consulting Services, LLC

Firm/Company

5077 Fruitville Rd. Ste 109-215

Address

Sarasota, FL 34232

City/State and Zip Code

areaka77@gmail.com

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

For further information concerning this matter, please call:

Areaka Jewell

305

360-1075

at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

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

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. Name of the limited liability company: Jewell Consulting Services, LLC

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

5077 Fruitville Rd. Ste 109-215

Sarasota, FL 34232

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

5077 Fruitville Rd. Ste 109-215

Sarasota, FL 34232

February 11, 2020

L20000047918

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Areaka P Jewell

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2622 Man of War Cir

Sarasota, FL 34240

FILED
2020 MAR -2 PM 2:48
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

5077 Fruitville Rd. Ste 109-215

Sarasota, FL 34232

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Areaka P. Jewell
Signature of a member or authorized representative of a member

Areaka P. Jewell

Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent