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(Re-	questor's Name)				
(Add	dress)	_			
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(Cit	y/State/Zip/Phone	e #)			
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(Document Number)					
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COVER LETTER

TO:	Registration Section Division of Corporations		, w
,	JN NIELSEN LLC		
SUBJ	ECT:		
		Name of Limited L	iability Company
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to the	following:
NAN	CY II NIELSEN		
	Name of Person	 	_
JN N	HELSEN LLC		
	Firm/Company		
13519	D 100TH TERRACE		
	Address		
LIVE	OAK FLUS 32060		
	City/State and Zip Coo	lc	
nniels	sen56@gmail.com		
 !	E-mail address: (to be used for future	annual report notif	ication)
For fu	rther information concerning this mad	ter, please call:	
NAN	CY II NIELSEN	386	590-688-7215
		at ()
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	■ \$25 Filing Fee	•	55 Filing Fee & Certified Copy

INHS18 (2/14)

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.

ı Na	JN NIELSEN LLC					
3 ()	me of the limited liability company:		13519 100TH			
. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailí <u>(N</u>	ing address of limited lote: MAY BE POST		
	LIVE OAK		LIVE OAK			
	FL 32060	_ _	FL 32060			
	FEBRUARY 24,2020		1,20000059857			
3.	Date of filing/registration in Florida	4.	Doo	cument number		
5. (a)	UNITED STATES CORPORATION AGENTS, INC.					
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State:	Ţ,	2020 SEC	
	Registered Office Address AUST BE FLORIDA STREET A 5575 S. SEMORAN BLVD	DDRESS)		ILLAHASSEI	2020 HAR 16 Sec	
	SUITE 36 ORLANDO, FL 32822	32060		SSE	- <u>- </u>	
(b)	NANCY H NIELSEN	<u>,</u>		با إنب	1 2: 2 5 Mi	J
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	l	FF: —	
	13519 100TH TERRACE					
	NEW Registered Office Address:					
	LIVE OAK	32060				
	, FL_					
change agent v was/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere bility cor f the limi limited li	I office and the npany, it is her ted liability co	te business office of treby confirmed the company or as other ny.	of the regi at the cha	stered ngc(s)
Signa	ture of a member or authorized representative of a member		Pri	inted or typed name of	signee	
provisi the obl to merc	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I he d in writing of this change.	performa	nce of my dutic	es and Lam famil	iar with a	nd accent
Signatu	re of Registered Agent					

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