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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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LLC REGISTERED AGENT CHANGE F. A. J. L REALTY, LLC

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MAY 18 2020

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.

Name of the limited liability company: F. A. J. L (a) 5300 WASHINGTON STREET	(b) 5300 WASHINGTON STREET		
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
307R	3	07R	
HOLLYWOOD, FL 33021	<u>H</u>	OLLYWOOD, FL 33021	
04/01/20	L2	0000091624	
Date of filing/registration in Florida	4.	Document number	
(a) LAMY R, IGOBERT			
Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:	
5300 WASHINGTON STREET			
Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	206	
307R			
HOLLYWOOD F	2020 MAY 15		
		•	
Registered Agents Inc.			
(b) Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	AH 10:	
(0)	d Office addre	AH 10: 17	
Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	AH 10: 17	
Enter name of NEW Registered Agent and/or NEW Registere 7901 4th St N	d Office addre	AH 10: 17	
Enter name of NEW Registered Agent and/or NEW Registere 7901 4th St N NEW Registered Office Address: STE 300	d Office addre	AH 10: 17	
Enter name of NEW Registered Agent and/or NEW Registere 7901 4th St N NEW Registered Office Address: STE 300	L 33702 The standard of the Standard of the register liability come of the limite	ate of Florida, it is hereby confirmed that after red office and the business office of the register pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company.	

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent