Division of Corporations **Electronic Filing Cover Sheet**

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LLC REGISTERED AGENT CHANGE JMS 2020 INVESTMENT, LLC

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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.	Na	me of the limited liability company: JMS 2020 Investme	nt. LLC			
2. (a)	No change	(b)	No change		
(ш,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		03-30-2020	- -	L200000929		
3. 5. ((e)	Date of filing/registration in Florida RYAN FURMAN	4.		Document number	
υ, (α)	(u)	Registered Agent and Registered Office shown on the records of the 450 S. ORANGE AVENUE	e Florida	Dept. of State	· :	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		ORLANDO,FL_3	32801			
(b)	b)	C T Corporation System				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	fficende	<u>lress</u> :		
		NEW Registered Office Address:		· 		
		1200 South Pine Island Road				
		Plantation, FL_3	3324			
the ager	cha nt v /wc	mited liability company is not organized under the laws nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he regis pility co the lim	tered office mpany, it is ited liability	and the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided in	
		See Com	JOE	DAVI\$, MA		
	-	of a member or authorized representative of a member			Printed or typed name of signee	
pro the t to n	visi obl iere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ily reflect a change in the registered office address, I ha I in writing of this System.	e to act perform for in (greby co	in this cupe ance of my e hapter 605 infirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been	
By: _N Sign	dich tatu	C T Corporation System Rele Holden Asst Sect Of Registered Agent				