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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
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SECONDARY SECONDAR

C. BRUMBLEY
DEL - 2 2021

COVER LETTER

TO:	Registratio Division of	n Section Corporations		, · · ·
SUBJ	SCE ECT:	NIC JAX PROPERTIES, LLC	;	
5000		Nan	ne of Limited L	iability Company
Dear S	Sir or Madam	:		
The en	nclosed Regis	tered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.
Please	return all co	rrespondence concerning th	is matter to the	following:
ALICI	IA BROWN G	RANT		
		Name of Person		
SCEN	IC JAX PROP	ERTIES, LLC		
		Firm/Company		
3575	RIVERSIDE A	VE		
		Address		
JACK	SONVILLE, F	L 32205		
		City/State and Zip Code		
ALIG	RANT@BELL	SOUTH.NET		
1	E-mail addres	s: (to be used for future ann	ual report notif	ication)
For fu	rther informa	tion concerning this matter,	please call:	
ALICI	A B GRANT		904 at (318-1617
	Na	me of Person		Area Code & Daytime Telephone Number
	P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed i	s a check for the following	amount:	
	■ \$25 Filii	ng 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.

JACKSONVILLE, FL 32205 ALICIA BROWN GRANT Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9976 RIDGEFIELD DR Registered Office Address: JACKSONVILLE JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 JACKSONVILLE JACKSONV	. Na	me of the limited liability company: SCENIC JAX PR	ROPERTH	ES.	LLC				
Principal office address of limited liability company: (Nate: MAST BE STREET ADDRESS) JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205 ALICIA BROWN GRANT Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9976 RIDGEFIELD DR Registered Office Address: JACKSONVILLE JACKSONVI	(a)	3575 RIVERSIDE AVE	- A	h)	P.O. BOX	380046			
Date of filing/registration in Florida 4. Document number ALICIA BROWN GRANT Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9976 RIDGEFIELD DR Registered Office Address: JACKSONVILLE JACKSONVILLE FL 32257 NEW Registered Office Address: NEW Registered Office Address: NEW Registered Office Address: Style Registered Office Address: NEW Registered Office Address: NEW Registered Office Address: Style Registered Office Address: ACKSONVILLE FL 32205 Fithe limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that af hange or changes are made, the Florida street address of the registered office and the business office of the registered and instituted liability company, it is hereby confirmed that the change vas/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. ALICIA BROWN GRANT Signature of a member or authorized representative of a member Printed or typed name of signee Chereby accept the appointment as revisitered agent and agree to act in this capacity. Literbey agree to complex with the propositioned that they capacity.	. (47)	• • • • • • • • • • • • • • • • • • • •		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
Date of filing/registration in Florida 4. Document number ALICIA BROWN GRANT Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9976 RIDGEFIELD DR Registered Office Address (MUST BE FLORIDA STREET ADDRESS) JACKSONVILLE . FL 32257 See Butter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: 3575 RIVERSIDE AVE JACKSONVSILLE . FL 32205 The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at hange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change ass/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. ALICIA BROWN GRANT Signature of a member or authorized/epresentative of a member. Printed or typed name of signee thereby ascent the appointment as registered agent and agree to act in this capacity. I further agree to comply with the proper agree to comply with the proper agreement of the limited in the capacity. I further agree to comply with the proper agreement of agents agree to act in this capacity. I further agree to comply with the proper agreement of the limited in the capacity. I further agree to comply with the proper agreement of agents agree to act in this capacity. I further agree to comply with the proper agreement of the limited in the capacity. I further agree to comply with the proper agreement of the limited in the capacity. I further agree to comply with the proper agreement of the limited in the capacity.		JACKSONVILLE, FL 32205		_] _	ACKSON	VILLE, FL 32	2205		
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