

L20000212384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

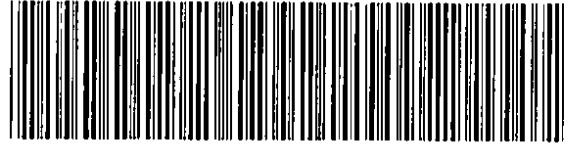
(Business Entity Name)

(Document Number)

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08/18/23--01001--016 \*\*100.00

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2023 AUG 18 AM 10:56  
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**WALK IN**

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**LLC AMEND**

1. **JEN FLORIDA 39 LLC**  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jen Florida 39, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristy Horan

\_\_\_\_\_  
Name of Person

Godbold, Downing, Bill & Rentz, P.A.

\_\_\_\_\_  
Firm/Company

222 W. Comstock Ave., Suite 101

\_\_\_\_\_  
Address

Winter Park, FL 32789

\_\_\_\_\_  
City/State and Zip Code

khoran@gdb-law.com

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

For further information concerning this matter, please call:

Kristy Horan

\_\_\_\_\_  
Name of Person

at ( 407 )

Area Code

647-4418

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

CR2E145 (2/14)

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: JEN Florida 39, LLC

SECOND: The Florida Document number of the limited liability company is: L20000212384

THIRD: The street address of the limited liability company's principal office is:  
1750 W. Broadway  
Suite 111  
Oviedo, FL 32765

The mailing address of the limited liability company's principal office is:  
1750 W. Broadway  
Suite 111  
Oviedo, FL 32765

FOURTH: The date the statement of authority became effective is: 08/14/2023

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is  
Authority to act on behalf of the Company is granted to Dan  
Edwards in his capacity as Vice President, and any duties and  
obligations by Denver Marlow have been terminated.

See attached Signature Pg.  
Typed or printed name of signature

Signature of authorized representative

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

