## L20000231536

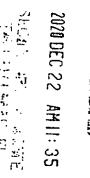
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
JDB Courier LLC SUBJECT:	
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Timothy Beaver	
Name of Person	
JDB Courier LLC	
Firm/Company	
2263 Marquette Ave	
Address	
Sanford, FL 32773	
City/State and Zip Code	-
timothy@i-fencefl.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	please call:
Timothy Beaver	407 784-6387 at ( )
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	amount:
<b>■</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## 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. N	ame of the limited liability company:IDB Courier LL	.C		
2 (a)		(	b)	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	····		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	274 Wilshire Blvd Ste 232		501 N. Orl	rlando Ave Ste 313, PMB 411
	Casselberry, FL 32707	<del>-</del>	Winter Par	ark, FL 32789
	08/03/2020		L200002315	1536
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				_
, ,	Registered Agent and Registered Office shown on the records of	of the Florid	ia Dept, of Stat	ale:
	Timothy Beaver			2020 DEC SPC 5 = 1
	Registered Office Address (MUST BE FLORIDA STREE)	T ADDRES	<u>(S)</u>	
	274 WILSHIRE BLVD 232			22
	CASSELBERY	L32707		- Table 1
		<u> </u>		· · · · · · · · · · · · · · · · · · ·
(b)				1: 3 <b>5</b>
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office a	<u>ddress</u> :	111
	NEW Registered Office Address:			<del></del>
	2263 Marquette Ave.			
				<del>-</del>
	Sanford, F	L		<u></u>
change agent was/w the art Signa	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the street and account the appointment or regulatered against and account the appointment of the account the appointment of the account of the account the appointment of the account of	ne register liability c s of the lin re limited	red office an ompany, it is nited liability con	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided mpany.  Beaver  Printed or typed name of signce
provis the ob to mer	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, is a writing of this change.	gree to ac le perforn led for in I hereby c	a in inis cap nance of my Chapter 605 confirm that	pacity. I further agree to comply with a duties, and I am familiar with and ac 15, F.S. Or, if this document is being for the limited liability company has bee

Signature of Registered Agent