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| (Requestor's Name) | | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Queinage Entity Name) | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

| TO: Registration Section Division of Corporations | · | | | |
|--|--|--|--|--|
| JL SALES & REPAIR LLC | | | | |
| SUBJECT: Name of Limited Liability Company | | | | |
| Dear Sir or Madam: | | | | |
| The enclosed Registered Agent/Registered Office | e Change and fee(s) are submitted for filing. | | | |
| Please return all correspondence concerning this | matter to the following: | | | |
| JORGE LEDESMA SR | | | | |
| Name of Person | | | | |
| JL SALES & REPAIR LLC | | | | |
| Firm/Company | | | | |
| 27900 SW 132ND CT | | | | |
| Address | | | | |
| HOMESTEAD/FLORIDA/33032 | | | | |
| City/State and Zip Code | | | | |
| JORGELEDESMA29@YAHOO.ES | | | | |
| E-mail address: (to be used for future annu | al report notification) | | | |
| For further information concerning this matter, p | nlease call: | | | |
| JORGE LEDESMA SR | 786 259-3676 OR 786-439-5414 | | | |
| Name of Person | Area Code & Daytime Telephone Number | | | |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | |
| Enclosed is a check for the following a | amount: | | | |
| □ \$25 Filing 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.

| 1. N | ame of the limited liability company: JL SALES & REP | AIR LLC | | |
|---|---|---|--|--|
| 2. (a) | 27900 SW 132ND CT | (b | 27900 SW 132ND CT | |
| (47) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | HOMESTEAD/FLORIDA/33032 | | HOMESTEAD/FLORIDA/33032 | |
| | 08/07/2020 | - | L20000238840 | |
| 3. 5. (a) | Date of filing/registration in Florida JORGE LEDESMA, SR | 4. | Document number | |
|). (u | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 27900 SW 132ND CT | | | |
| | Registered Office Address (MUST BE FLORIDA STREET A | DDRESS | | |
| | HOMESTEAD, FL | 33032 | 2022 JUN 27 | |
| (b) | JORGE LEDESMA, JR | | JN 27 | |
| ` ' | Enter name of NEW Registered Agent and/or NEW Registered | Office add | iress: | |
| | 27900 SW 132ND CT | | PH 3: 00 FEORIDA | |
| | NEW Registered Office Address: | | —————————————————————————————————————— | |
| | HOMESTEAD ,FL | 33032 | | |
| chang agent was/w | limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the | registere bility con f the limi limited li | d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in | |
| | ature of a member or authorized representative of a member | | Printed or typed name of signee | |
| I here provis the ob to men notifie | eby accept the appointment as registered agent and agra sions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change. | ee to act performa I for in C ereby co | in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been | |

Signature of Registers