Florida Department of State Division of Corporations Electronic Eiling Cover Sheat

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To:			29
	Division of C	Corporations	
	Fax Number	: (850)617-6383	**\
From:			
, , , , , ,		: REGISTERED AGENTS INC.	퍞
		er : I20090000081	,
		: (307)200-2803	
	Fax Number	: (855)330-1010	

LLC REGISTERED AGENT CHANGE M&J REAL ESTATE INVESTMENT GROUP LLC

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12/30/21/1

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

l. Na	me of the limited liability company: M&J Rea	I Est	ate Inv	vestment	Gro	up L	LC_	
2. (a)	737 MANATEE BAY DR	(b	(b) 737 MANATEE BAY DR					
(41)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	BOYNTON BEACH, FL 33435		BOYN	TON BEACH	Ⅎ, FL	3343	35	
	08/18/20		L20000	253774				
3.	Date of filing/registration in Florida	4.		Document num	ber			
5. (a)	JUNIOR SAINVAL							
. (11)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Sta	- te:		6-2		
	737 MANATEE BAY DR			_	: .			
	Registered Office Address (MUST BE FLORIDA STREET A	ADD <u>RESS</u>	<u>n</u>		<i>:</i>	DEC 2		
	BOYNTON BEACH , FI.	3343	5	<u></u>	: :,	9 PM	.=	
(b)	Registered Agents Inc.			_	Tank de A	ե։ 52		
	Enter name of NEW Registered Agent and/or NEW Registered	Omce ac	iaress:					
	7901 4th St N							
	NEW Registered Office Address:			··· ·				
	STE 300	<u></u>		_				
	St. Petersburg	3370	2	_				
the cha agent v was/w	imited liability company is not organized under the larging or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regi ability c of the lir limited	stered offic ompany, it nited liabili liability co	ce and the busine is hereby confiri ity company or a	iss om ned tha	ce of the at the ch	e registered iange(s)	
<u>ڪ: ڍ</u>	nure of a member or authorized representative of a member		ey Park	Printed or typed i	name of	signee		
I here provis the ob- to mer	thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It discovered this change.	r perjorn ed for in	unce oj my Chapter 6U	pacity. I further a duties, and I and 35. F.S. Or, if the	agree 1 famil 1s docu	to comp iar with ment is	being filed	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

- Assistant Secretary

Bill Havre

Signature of Registered Agent