

h20000383639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

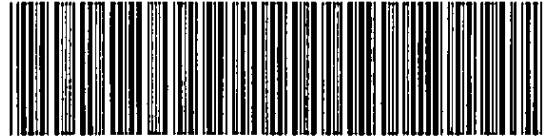
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

A. RIVERS

MAR 2 - 2023



500398125945

12/13/22--01008--013 \*\*25.00

FILED  
2022 DEC 13 AM 10:50  
CLERK OF COURT  
JANIS L. BRYAN, CLERK



2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: December 06, 2022

AE: Christopher Gonzalez

TO: Florida Division of Corporations 4947

REFERENCE: 1874952

THE CENTRE OF TALLAHASSEE

2415 N. MONROE STREET, SUITE 810

TALLAHASSEE, FL 32303

FAX:

PLEASE PERFORM THE FOLLOWING:

**MJL HOLDINGS GROUP, LLC**

**File Change of Registered Agent**

IN: FL

PLEASE RETURN:

PLEASE CALL (800)533-7272 ATTN: Christopher Gonzalez TO CONFIRM FILING RESULTS

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET  
(800)533-7272

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MJL HOLDINGS GROUP LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Gonzalez

Name of Person

Paracorp Incorporated

Firm/Company

2304 Gateway Oaks Drive #100

Address

Sacramento, CA 95833

City/State and Zip Code

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

For further information concerning this matter, please call:

Christopher Gonzalez

888

272-3725

at ( )

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 amount:

☒ \$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. Name of the limited liability company: MJL HOLDINGS GROUP LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

1385 Sterling Pine Place

Loxahatchee, FL 33470

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

1385 Sterling Pine Place

Loxahatchee, FL 33470

3. 12/03/2020 Date of filing/registration in Florida

4. L20000383639 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
SARQUIS, MELISSA

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1385 Sterling Pine Place

Loxahatchee, FL 33470

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Paracorp Incorporated

NEW Registered Office Address:

155 Office Plaza Drive, 1st Floor

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Joseph Cappuccio

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jody Moua, Assistant Secretary, Paracorp Incorporated  
Signature of Registered Agent

FILED  
2022 DEC 13 AM 10:50  
TALLAHASSEE, FL  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS