

3/1/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MARTINEZ LAW GROUP, PLLC.
Account Number : I20170000062
Phone : (305)454-5804
Fax Number : (305)454-5808

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC REGISTERED AGENT CHANGE
FENIX J.E., LLC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2021 FEB 29 PM 12:04

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Electronic Filing Menu

Corporate Filing Menu

Help

H210000062631 3

H21000082631 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FENIX J.E., 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:

JEISSA MARTINEZ

Name of Person

MARTINEZ LAW GROUP, PLLC.

Firm/Company

1999 S.W. 27th Avenue, 1st Floor

Address

Miami, Florida 33145

City/State and Zip Code

jm@martinezlwg.com

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

For further information concerning this matter, please call:

Jeissa Martinez

305

454-5576

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

INHS18 (2/14)

H21000082631 3

H21000082631 3

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: FENIX J.E., LLC.

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

16634 N.W. 89th Court16634 N.W. 89th CourtMiami Lakes, Florida 33018Miami Lakes, Florida 330181/6/2021L21000012849

3. Date of filing/registration in Florida 4. Document number

5. (a) Ela Hernandez

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

16634 N.W. 89th Court, APT 323Miami Lakes, FL 33018

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

NEW Registered Office Address:

16634 N.W. 89th CourtMiami Lakes, FL 33018

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.

Jose A. Hernandez
Signature of a member or authorized representative of a member

Jose A. Hernandez
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.

E. Hernandez
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

H21000082631 3