Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Humber : (850)617-6383

From:

Account Name : LECALZOOM.COM INC. Account Number: 120010900062 Phone: (323)962-9600 Fax Number : (323)962-3889

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

Email Address:

LLC REGISTERED AGENT CHANGE JAG EXPRESS ENTERPRISES LLC

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MAY 2 6 2021

A. LUNT

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Help

INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT:JAG EXPRESS ENTERPO	RISES LLC			
	ame of Limited	Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered C)ffice Change at	nd fee(s) are submitted for filing		
Please return all correspondence concerning		_		
Cheyenne Moseley				
Name of Person				
Legalzoom.com, Inc.				
Firm/Company	··		_ 1	- 2
101 N. Brand Blvd., 10th Floor			ALL AI	EILED 2021 MAY 25 PM 4: 36
Address			iAB iASS	2 A E II
Glendale, CA 91203				TED PH
City/State and Zip Code		- -	는 의 기가 가지 않는 기가 되었다.	
pliessheena@hotmail.com			TIE A	36
E-mail address: (to be used for future ar	nnual report not	ification)		
For further information concerning this matte	er, please call:			
Cheyenne Moseley	008 at (773-0888 ext 9724		
Name of Person		Arca Code & Daytime Teleph	ione Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	AAILING ADDRESS: Legistration Section Division of Corporations LO. Box 6327 Callahassee, Florida 32314		
Enclosed is a check for the followin	ig 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.

	Principal office address of limited fiability company:		(b)	b) Muiling address of limited liability co	
	(Note: MUST BE STREET ADDRESS)			Mailing address of limited liability of (Note: MAY BE POST OFFICE	ицыпу: <i>вох</i>)
	4128 NW 34TH WAY			4128 NW 34TH WAY	
	LAUDERDALE LAKES, FL 33309	_		LAUDERDALE LAKES, FL 33309	
	01/11/2021		Į	L21000026963	
	Date of filing/registration in Florida	4.	_	Document number	
(a)					
()	Registered Agent and Registered Office shown on the records of ALCINA, CLAUDINE	the Flori	da I	a Dept. of State:	
	Registered Office Address (MUST IN FLORIDA STREET	ADDRE.	<u>55)</u>	50	
	1270 NW 31ST AVE FORT LAUDERDALE	SUIT	ΕE	E	
	FT LAUDERDALE ST	3331	1		
	, rı		_		
(b)				یم	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	1 Office a	ddi	Idress:	
					-151 -152
	loobooo ('oasaball				
•	Tasheen Campbell	- -			ا مورد اسرا
	NEW Registered Office Address:				10 N. C.
	<u> </u>	·		Sir of the state o	OF F
	NEW Registered Office Address: 4128 NW 34TH WAY	2020		SSEE OF STATE	ED 4:36
	NEW Registered Office Address: 4128 NW 34TH WAY	33309	3	Idress: TALLANASSEE, FLORIDA	PM 4: 36
ent w s/wc	NEW Registered Office Address: 4128 NW 34TH WAY	ws of th the reg ability o	e S isto on	State of Florida, it is hereby confirmed the stered office and the business office of the company, it is hereby confirmed that the chapted liability company or as otherwise pro-	at after register
cha ent we is/we	NEW Registered Office Address: 4128 NW 34TH WAY LAUDERDALE LAKES , FL imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited little authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the regrability confitned in the line of the lin	e S isto con mit lia	State of Florida, it is hereby confirmed the stered office and the business office of the company, it is hereby confirmed that the chapted liability company or as otherwise pro-	at after register
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