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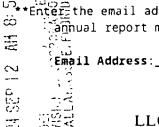
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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206 SECRETANY OF STATE



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

LLC REGISTERED AGENT CHANGE JC CAPITAL HOLDINGS LLC

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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. No	nne of the limited liability company: JC CAPITAL HOI	LDINGS LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	02/24/2021		00091866 Document number
3.	Date of filing/registration in Florida COLLADO, JHONSEL	4.	Document name
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 2900 Northeast 7th Avenue Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 3908		
	Miami . FL		NOZY SEP -
(b)	REGISTERED AGENTS INC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4TH ST N <u>NEW Registered Office Address:</u> STE 300		2 PH 2:
	ST. PETERSBURG FI.	33702	
change agent was/w the art	limited liability company is not organized under the law cor changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law.	is of the State registered offi bility company I the limited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
Signa	there of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob- to mer notifie	thy accept the appointment as registered agent and agra ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided wiv reflect a change in the registered office address. I had in writing of this change.	ec to act in thi. performance of Ljor in Chapte erchy confirm	s capacity. I further agree to comply with the faw duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been
Signati	ार विश्वित Agent David Roberts		

9/12/2024 05:18:15 PDT