# 200 211 648

(Requestor's Name)							
(Address)							
(Address)							
<b>,</b> , , , , , , , , , , , , , , , , , ,							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Section 2 day from by							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer.							

Office Use Only



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2023 HOV 27 PH 2: 13

RECEIVED

#### Incorporating Services, Ltd.

**inc**serv<sup>o</sup> 1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

## ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com 850-245-6051

**FROM** Melissa Moreau mmoreau@incserv.com 850.656.7953

**REQUEST DATE** 11/27/2023

PRIORITY Regular Approval OUR REF # (Order ID#) 1200460

**ORDER ENTITY** CJ INVEST ONE LLC

#### PLEASE PERFORM THE FOLLOWING SERVICES: CJ INVEST ONE LLC (FL)

File the attached change of agent document

#### NOTES:

\$25.00 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, November 27, 2023 Page 1 of 1

#### COVER LETTER

	istration Section sion of Corporations						
SUBJECT:	CJ Invest One LLC						
	Name of Limited Liability Company						
Dear Sir or f	Madam:						
The enclosed	d Registered Agent/Registered	Office Change and t	ee(s) are submitted for filing.				
Please return	all correspondence concerning	g this matter to the fo	ollowing:				
Sapphire Mar	quez						
<del></del>	Name of Person		_				
SunDoc Filin	gs						
	Firm/Company		_				
7801 Folsom	Blvd Ste 202						
	Address		_				
Sacramento C	CA 95826						
	City/State and Zip Cod	e	<del></del>				
j.boenisch@jl	beeline.com						
E-mail	address: (to be used for future	annual report notific	ration)				
For further in	nformation concerning this mat	ter, please call;					
Juergen Boen	isch	412 at (	2424400				
	Name of Person		Area Code & Daytime Telephone Number				
Reg Divi P.O.	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Encl	losed is a check for the follow	ing amount:					
<b>■</b> \$2	25 Filing Fee	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.

I. Na	nme of the limited liability company: CJ Invest One LL	.C			
2. (a)	5896 ANTIGUA WAY	(h)	896 ANTIGUA	A WAY	
<u>.</u> . (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(17)_			ed liability company: ST OFFICE BON)
	NAPLES, FL 34113		SAPLES, FL 34	H13	<del> </del>
	05/13/2021		1000211648		
3.	Date of filing/registration in Florida	4.	Doce	ument number	
5. (a)	SUNDOC FILINGS INCORPORATED				
	Registered Agent and Registered Office shown on the records of 3458 LAKESHORE DRIVE	the Florida De	ept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>			
(0)	TALLAHASSEE, FL	32312			20.
	United Agent Group Inc.				1.5 AGN 5.05
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				27
	801 US Highway I				
	NEW Registered Office Address:				2:13
	North Palm Beach	33408	-		
change agent v was/we	imited liability company is not organized under the law or 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 cles of organization or the operating agreement of the	vs of the Staregistered of ability composite the limite	office and the pany, it is here d fiability con	business office by confirmed to pany or as oth	e of the registered that the change(s)
	Juergen Boenisch	Juergen	Boenisch		
I here provisi accepti heing f has hee	ture of a member or authorized representative of a member by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete the obligations of my position as registered agent as pi iledto merely reflect a change in the registered office of annotified in writing of this change.	ee to act in performanc rovided for address, I h	this comovity	led or typed name I further agre s. and I am fam 15. F.S. Or, if t that the limite	o to comply with the
	/illiam Huser				
Signatu	re of Registered Agent				