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18134368460

From: Venerable Law Firm

Division of Corporations



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(((H22000098522 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES

Account Number : I20210000107

Fax Number

: (813)284-4727 : (813)436-8460

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

Email Address: jsampson@venerable.law

LLC REGISTERED AGENT CHANGE JA CRYPTO PARTNERS 001 LLC

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	gistration Section vision of Corporations			
SHRIFCT	JA CRYPTO PARTNERS 001.	LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			
Dear Sir or	Madam:			
The enclos	ed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.	
Please retu	rn all correspondence concernin	g this matter to the	following:	
JASON SA	MPSON		_ _	
	Name of Person			
VENERAB	LE CORPORATE AND TRUST S	SERVICES, LLC		
	Firm/Company		<u> </u>	
301 WEST	PLATT STREET, NO. 657			
	Address	<u></u>	_	
TAMPA, F	L 33606			
	City/State and Zip Co	de		
jsampson@	venerable.law			
E-ma	il address: (to be used for future	annual report notif	ication)	
For further	information concerning this ma	tter, please call:		
JASON SA	MPSON	813 at (284-4727	
	Name of Person		Area Code & Daytime Telephone	Number
Re Di P.0	ailing Address: Egistration Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	310
En	closed is a check for the follow	ving amount:		
	■ \$25 Filing Fee			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY H22000098522 3

18134368460

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. N	ame of the limited liability company: JA CRYPTO PAI	RTNERS	3 001, LLC:	<u></u> .
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	301 WEST PLATT STREET, NO. 657		301 WES	ST PLATT STREET, NO. 657
	TAMPA, FL 33606	_	ТАМРА.	FL 33606
	05/28/2021		12100025	0806
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
. (-,	Registered Agent and Registered Office shown on the records of REGISTERED AGENTS INC.	the Floric	la Dept, of St	2022
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	7901 4TH ST N STE 300			FILED Asser.
	ST. PETERSBURG , FI			
				TETALISTALISTALISTALISTALISTALISTALISTALIS
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office v	dileas	- DA
	Enter name of Sector Registered Agent and Sector Registered	L COURT A	<u></u>	
	VENERABLE CORPORATE AND TRUST SERVICES	, LLC		
	NEW Registered Office Address:			
	301 WEST PLATT STREET, NO. 657			_
	TAMPA, FI	33606		_
change agent v was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability c of the lin limited	ed office a ompany, it nited liabil liability co	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
		JA	SON SAMP	SON, Authorized Representative Printed or typed name of signee
I here provis the oh to mer	by accept the appointment as registered agent and agricins of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a charge in the registered agent as provided in writing of this change.	ree to ac perform d for in hereby c	t in this ca tance of m Chapter 60, confirm tha	pacity I torther garee to comply with the
Signati	ure of Registered Agent			