(Requestor's Name)
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COVER LETTER

Registration Section Division of Corporations

ECT:N	ame of Limited	Liability Company	
Sir or Madam:			
:nclosed Registered Agent/Registered O	office Change an	d fee(s) are submitted for filing.	
se return all correspondence concerning	this matter to the	e following:	
rew Pierce			
Name of Person			
Jy's Florida LLC			
Firm/Company		- 	
1 N. Tamiami Trail STE E6		r o	2921, 1
Address		- '	41- ACS 1762
rasota, Florida, 34243			E.
City/State and Zip Code	•	, 11 , 23 11	AH 9: 40
oorts@cloudpeaklaw.com		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	1,0
E-mail address: (to be used for future a	nnual report not	ification)	
r further information concerning this matte	er, please call:		
ndrew Pierce	at (300-0042	
Name of Person		Area Code & Daytime Telephone Num	iber
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the followi	ng amount:		
■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy	

TEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company ts the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

8051 N. Tamiami Trail STE E6	(b)	51 N. Tamiami Trail STE E6		
Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Sarasota, Florida, 34243		
Sarasota, Florida, 34243	Sa			
06/14/2021	L21	000286324		
Date of filing/registration in Florida JOHN SCOTT WARD	4.	Document number		
Registered Agent and Registered Office shown on the re 1130 W. OLYMPIA ST.	ecords of the Florida Dep	ı. of State:		
Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS)			
HERNANDO	, FL		2024 NOV	
Cindy's Florida LLC		: 		
Enter name of NEW Registered Agent and/or NEW R	epistered Office address	<u></u>		
8051 N. Tamiami Trail STE £6			`;	
NEW Registered Office Address:			., 0	
Sarasota	34243			
Sarasota	, FL			
imited liability company is not organized under or changes are made, the Florida street address will be identical. Or in the case of a Florida litere authorized by an affirmative vote of the meticles of organization or the operating agreement	ss of the registered of mited liability compa embers of the limited at of the limited liabil	ffice and the business office any, it is hereby confirmed to liability company or as oth	e of the registered that the change(s)	
ture of a member or authorized representative of a memb	er	Printed or typed name	of signee	
by accept the appointment as registered agent ions of all statutes relative to the proper and co ligations of my position as registered agent as ely reflect a change in the registered office add	omplete pertormance	roimvaunes ana iamiam	unar wan ana acce	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00