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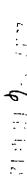
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COVER LETTER

Firm/Company 3620 116th Stret West Address Bradenton, FL 34210 City/State and Zip Code laurielbunger@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Laurie Bunger at () 725-9286 Name of Person Area Code & Daytime Telephone Nur Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	FO: Registration Section Division of Corporations		:
Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Decicco Name of Person Jay D Services Firm/Company 3620 116th Stret West Address Bradenton, FL 34210 City/State and Zip Code laurielbunger@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Laurie Bunger Name of Person Area Code & Daytime Telephone Nur Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	Jay D Services 1 LLC SUBJECT:		
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Jason Decicco Name of Person Jay D Services Firm/Company 3620 116th Stret West Address Bradenton, FL 34210 City/State and Zip Code lauriclbunger@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Laurie Bunger Name of Person Area Code & Daytime Telephone Nur Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	The enclosed Registered Agent/Registered Offi	ice Change and fee	e(s) are submitted for filing.
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Bradenton, FL 34210 City/State and Zip Code lauriclbunger@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lauric Bunger Name of Person Area Code & Daytime Telephone Nur Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: Registrations Registraction Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32303 Enclosed is a check for the following amount:	Jason Decicco		
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City/State and Zip Code laurielbunger@yahoo.com	Address		
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E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Laurie Bunger 941	City/State and Zip Code		
For further information concerning this matter, please call: Laurie Bunger Name of Person Preson Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: P41 725-9286 Area Code & Daytime Telephone Nur Street Address: Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Name of Person Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: 725-9286 Area Code & Daytime Telephone Nur Street Address: Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	E-mail address: (to be used for future ann	ual report notifica	tion)
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	Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Enclosed is a check for the following	; amount:	
■ \$25 Filing Fee	■ \$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.

	(b)_		
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of lir	nited liability company: POST OFFICE BOX)
3620 116th Street West	3	3620 116th Street West	
Bradenton, FL 34210	I	Bradenton, FL 34210	
08/03/2021	L	21000349035	
Date of filing/registration in Florida	4.	Document numb	er
UNITED STATES CORPORATION AGENTS, INC			
Registered Agent and Registered Office shown on the records of	the Florida D	lept, of State:	
5575 S. SEMORAN BLVD. 36, ORLANDO, FL 32822			
Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	.		
, FI	·		
Jason D. Decicco			
Enter name of NEW Registered Agent and/or NEW Registered	l Office addr	ess:	
3620 116th Street West			
NEW Registered Office Address:			;, _
			•
Bradenton F	34210 L		€
or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members	ability com of the limite limited lia	ipany, it is hereby confirmed the liability company or as	ed that the change(s)
	(Note: MUST BE STREET ADDRESS) 3620 116th Street West Bradenton, FL 34210 08/03/2021 Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC Registered Agent and Registered Office shown on the records of 5575 S. SEMORAN BLVD. 36, ORLANDO, FL 32822 Registered Office Address (MUST BE FLORIDA STREET)	(Note: MUST BE STREET ADDRESS) 3620 116th Street West Bradenton, FL 34210 08/03/2021 Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC Registered Agent and Registered Office shown on the records of the Florida D 5575 S. SEMORAN BLVD, 36, ORLANDO, FL 32822 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	Solution Street West 3620 116th Street West 3620 116th Street West

Signature of Registered Agent