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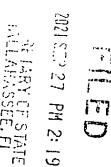
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: JEK Co	DOKTES LLC		
Name of Lim	ited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
JOSE BUTAHOUT Name of Person			
J!K Cookins, LLC Firm/Company			
9765 SW 53 ²² TCN Address			
OCALA, FL 34476 City/State and Zip Code			
Tose betavant 2 e hotma // con E-mail address: (to be used for future annual repor	t notification)		
For further information concerning this matter, please ca	ill:		
Name of Person	803) 908-0680 Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount:			
S25 Filing Fee	S55 Filing Fee & Certified Copy		

INHS18 (2/14)

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. Ni	ame of the limited liability company:	Cooke	3, LLC	
2. (a)	9765 SU 5300 TEIL		,	9765 SW 532 TOL
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	OCALA, FL 34476			OCALA, FC 3447L
	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
	Segrence 17 2021		1210	00412300
3.	Date of filing/registration in Florida	- _{4.} -		Document number
5. (a)	CHETERYE MOSERY, US CORP. A	65-75		
	Registered Agent and Registered Office shown on the records of	f the Florida I	Dept. of State	:
	- UNITED STATES COMPULATED ACCUSS			
	Registered Office Address (MUST BE FLORIDA STREÉT) 5575 S. SEMOLAN BLUD 30			
	<u>Craajoo</u> . F	L 328	22	1991
(b)	JOSE BETAKOURT			را ا (تر) "" المعين الله الله الله الله الله الله الله الل
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office addr	<u>'ess</u> :	2 7
				P P
	NEW Registered Office Address:			E.S. S.
	9765 SU 53° TEA.			T PH 2: 19 RESSEE, FL
	Ocaca F	L34"	176	
change agent v was/wo	imited liability company is not organized under the la 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 cles of organization or the operating agreement of the	e registered lability com of the limit	office and pany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signal	iure of a member or authorized representative of a member			Printed or typed name of signee
I herei provisi the obl to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I impriving of this change.	ree to act in performan ed for in Ch hereby con	this capa ce of my d apter 605, firm that ti	•
Signatu	re of Registered Agent			
,	//			