Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number: 076117000420 Phone : (561)650-0728 Fax Number : (561)671-2527

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

dean@storageusa.com

LLC REGISTERED AGENT CHANGE N63JK, LLC

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Help

/s/ Dean Jernigan
Signature of Registered Agent

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.

l. Na	ame of the limited liability company: N63JK, LLC				<u></u> -	
2. (a)			(b))		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				_	nited liability company:
	5775 Collins Avc. Apt 303			5275 Call		<u>OST OFFICE BOX</u>)
	5775 Connis Ave. Apt 303	5775 Collins Ave. Apt 303		ins Ave. Apt 303		
	Miami Beach, Fl. 33140	_		Miami Bea	ach, 33140	
	10/28/2021			L210004666	645	
3.	Date of filing/registration in Florida	- 4.	-		Document number	or
e (-)	CT Corporation System					
5. (a)	Registered Agent and Registered Office shown on the records of	the Flo	rida	Dept. of State	_ с :	
	Registered Office Address	1DDRI	ESS		_	
	1200 S Pinc Island Road, #250			•		
	Plantation	33324	ļ		-	~ 3
	, rL					2023 HAY
(b)	Dean Jernigan					
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress;	_	
						\$ F22
						PR 50 5
	NEW Registered Office Address:				_	
	5775 Collins Ave. Apt 303				_	27
	Miami Beach , FL	33140)		_	
hange igent v vas/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	s of t regist bility f the l	he s erec cor imi	d office and nearly, it is ted liability	d the business offi s hereby confirmed y company or as o	ce of the registered d that the change(s)
/s	/ Dean Jernigan	D	can	Jernigan		
Signat	ture of a member or authorized representative of a member	_			Printed or typed nam	ne of signee
provisi he obli to mere	by accept the appointment as registered agent and agri- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to d perfor I for it ereby	ict i ma. n Ci coi	n this capa nce of my o hapter 605 nfirm that i	acity. I further ago duties, and I am fa , F.S. Or, if this d the limited liability	ree to comply with the miliar with and accept locument is being filed v company has been