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(Requestor's Name)							
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PICK-UP	☐ WAIT	MAIL					
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Certified Copies Certificates of Status							
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of 4/3/2022

## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CJS FL Properties LLC		
Sobrect:	Name of Limited Liability Company	
Dear Sir or Madam;		
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
Christopher G. Schroeder		
Name of Person		
CJS FL Properties LLC		
Firm/Company		
00044 Tables 01		
28841 Trenton Ct		
Address		
Bonita Springs, FL 34134		
City/State and Zip Co	ode	
chris@schroedercity.com		
E-mail address: (to be used for future	re annual report notification)	
For further information concerning this m	natter, please call:	
Christopher Schroeder	920	
Name of Person	at (920 ) 362 2290  Area Code & Daytime Telephone Number	
STREET/COURIER ADDRES		
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327 Tallahassee, Florida 32314	
2661 Executive Center Circle Tallahassee, Florida 32301	rananassee, monda 52514	
Enclosed is a check for the follo	owing amount:	
☐ \$25 Filing Fee	<b>☑</b> \$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

1. N	ame of the limited liability company: CJS FL Proper	ties LL	.C			
2. (a)	28841 Trenton Ct	(b) 28841		Trenton Ct		
4. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0.		Mailing address of lim (Note: MAY BE PC		
	Bonita Springs, FL 34134	-	Bonita S	prings, FL 3410	34	
	10/28/2021	- !	 L2100046	<del></del>		
3.	Date of filing/registration in Florida	4.		Document number		
J.	UNITED STATES CORPORATION AGENTS,				•	
5. (a)	Registered Agent and Registered Office shown on the records of the		Dent of State	_ ,a.		
	28841 Trenton Ct	e i ionida	rept. or craite	••		
	Registered Office Address (MUST BE FLORIDA STREET AL	)DRFSS	<b>.</b>	-		
	Registered Office Address (MOST WELT EDNINGEST WELT TO	<u> </u>	•			
	Bonita Springs, FL 3	4134			2022 H	<b>~</b>
(b)	Christopher Schroeder			1	2022 MAR 23	===== ===============================
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice add	lress:	SSEE FI	AM 11: 4	
	NEW Registered Office Address:				1	
				-		
	,FL,			-		
the ch agent was/w	limited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of incressof organization or the operating agreement of the liability of the	he regis bility co the lim mited l	tered office mpany, it is ited liability iability con	e and the business s hereby confirmed y company or as o	office ( d that t	of the registered he change(s)
Sign	ature of a member or authorized representative of a member		1	Printed or typed nam	e of sign	nee
provis the ob to men notific	thy accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p digations of my position as registered agent as provided any reflect a change in the registered office address. I he are of Registered Agent	e to act erform for in C rreby co	in this cap ince of my hapter 605 infirm that	acity. I further ag duties, and I am fo 5, F.S. Or, if this o the limited liabilit	ree to c miliar locume v comp	comply with the with and accept nt is being filed any has been