## 121000499227

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(Cil	ty/State/Zip/Phone	#)
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## **COVER LETTER**

TO: Registration Section Division of Corporations	•
SUBJECT: Junto Recreational ( Name of Limited Li	ability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and i	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the f	following:
Frecliric K John Gansz Name of Person	_
Junior Recreational Golf Lead Firm/Company	juoll
15370 Byth Ave. W. Address	_
City/State and Zip Code	_
E-mail address: (to be used for-future annual report notific	Igmail-Com
For further information concerning this matter, please call:	
Frederick Gansz at 561 Name of Person	) 304-2909 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
Factored is a check for the following amount-	

☐ \$55 Fiting Fee & Certified Copy

INHS18 (2/14)

△\$25 Filing Fee

## 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. Name of the limited liability company: Junior Rec. (Pational)	Golf League 110
2. (a) 15320 84th Avr. N. (b) Sar	0 /
\\\^\\\_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
West Palm Beach Fr 23418	
11/22/2021 /_2	1006499727
_ !'	Document number
5. (a) Inc. Authority RA	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State	:
390 N orange Ave. Ste Z300-N	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
orlando FZ 32801	
	20
	PIE
(b) Frederick John Ganst Enter name of NEW Registered Agent and/or NEW Registered Office address:	
Sinor hance of NEW Registered Agent and Casty Registered Office address.	27
15370 744 Are. N.	TARY OF STATE
NEW Registered Office Address:	TO I
West-Palm Beach FL 33418	TE 21
If the limited liability company is not organized under the laws of the State of Flor	ida, it is hereby confirmed that after the
change or changes are made, the Florida street address of the registered office and agent will be identical. Or, in the case of a Florida limited liability company, it is was/were authorized by an affirmative vote of the members of the limited liability the articles of organization or the operating agreement of the limited liability company.	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete performance of my different the obligations of my position as registered agent as provided for in Chapter 605, to merely reflect a change in the registered office address, I hereby confirm that the notified in writing of this change.	city. I further agree to comply with the attes, and I am familiar with and accept F.S. Or, if this document is being filed e limited liability company has been
Signature of Registered Agent	