## L2200051215

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				
J. HORNE AUG - 5 2022				

Office Use Only



300392113023



DIVIU. TALLAMASSEE, FLORIOA

2022 AUG -4 PM 12: 59

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: I2000000195				
REFERENCE	: 850949 8276536				
AUTHORIZATION					
COST LIMIT	Sould He man				
ORDER DATE : August 2, 2022					
ORDER TIME : 9:33 AM					
ORDER NO. : 850949-008					
CUSTOMER NO: 8276536					
CHANGE OF AGENT					
NAME. IMCC HADDEN CT IIC					
NAME: JMCG HARDEN ST., LLC					
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker	FYT#				
CONTINCT THROOM, BYTTEHA DAKET	MAL I IT				

EXAMINER:

## · 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. 1	lame of the limited liability company:   JMCG HAR	NDEN ST., LLC	
2. (a)			
. ,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: (0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	1395 N.W. 167TH STREET		1395 N.W. 167TH STREET
	MIAMI GARDENS, FL 33169		MIAMI GARDENS, FL 33169
	02/02/2022	Ĺ	22000057218
3.	Date of filing/registration in Florida	4.	Document number
5. (a	)		
- (-	Registered Agent and Registered Office shown on the record CHANDLER, KATHRYN	ds of the Florida D	ept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
1395 N.W. 167TH STREET			2022 AUG SECRETA VALLAHA
	MIAMI GARDENS	. FL 33169	
		-	· · · · · · · · · · · · · · · · · · ·
(b)	Enter name of NEW Registered Agent and/or NEW Regist		<u> </u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	tered Office addre	
	Corporation Service Company		<del>·</del> ω
	NEW Registered Office Address:		<del></del>
	1201 Hays Street		
	Tallahassee	22204	
	1 41141 1655-50	. FL	
change agent was/w the art	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of S/ Christopher Chen	The registered of the liability comparts of the limite the limited liab	office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
Signature of a member or authorized representative of a member		Printed or typed name of signee	
I here provis the obs to mer notifie	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.		
Signatu	ire of Registered Agent	GRACE E. KI	RBY, ASST. VICE PRESIDENT