To:

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

## LLC REGISTERED AGENT CHANGE A&J DRIFTWOOD HAVEN LLC

Certificate of Status	0
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T. LEMIEUX MAR 2 4 2023 To:

## COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: A&J DRIFTWOOD HAVEN LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing

Please return all correspondence concerning this r	natter to the	following:
Cheyenne Moseley		
Name of Person		<del>_</del>
Legalzoom.com, Inc.		
Firm Company		- •
101 N. Brand Blvd., 11th Floor		
Address		
Glendale, CA 91203		
City/State and Zip Code		_
duross86@yahoo.com		
E-mail address: (to be used for future annual	report notifi	cation)
For further information concerning this matter, ple	euse call.	
Cheyenne Moseley	800	773-0888 ext 9724
Name of Person		Area Code & Daytime Telephone Number
STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Iahassee, Florida 52314
Enclosed is a check for the following an	nount:	
□ \$25 Filling Fee	<b>VA</b> \$5	5 Filing Fee & Certified Copy

Ta:

## 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.

Na	me of the limited liability company: A&J DRII	FTWOOI	D HAVEN LLO	j		
(a)	1112 14TH AVE. NORTH	(b) 170	1 2nd Ave North			
· · · ·	Principal office address of limited liability company:	(۷)	Mailing address of limited liability company:			
	( <i>Note: MUST BE STREET ADDRESS</i> )  JACKSONVILLE, FL 32250		( <u>New: MAY BE POST OFFICE BOX)</u> JACKSONVILLE BEACH, FL 32250			
	02/08/2022	L2200	00066424			
	Date of filing/registration in Florida	4.	Document number			
(a)	DUROSS, JAMES M.					
	Registered Agent and Registered Office shown on the records of t	he Florida Dept. of	State:			
	1701 2nd Ave North					
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	v			
			<u></u>	. 22		
	JACKSONVILLE BEACH . FL	32250	•	2023 H 7		
(b)	UNITED STATES CORPORATION AGENTS	S, INC.		$\omega \zeta$		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	-	- P (-		
	476 Riverside Ave.			기 <b>조</b> 당하 표		
	NEW Registered Office Address:	<del></del>		906		
	Jacksonville					
	Jacksonville , FL.					
char ent w	mited liability company is not organized under the law age or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of	the registered or bility company I the limited lia	flice and the business off , it is hereby confirmed the hility company or as other	ice of the register at the change(s)		
	oles of organization or the operating agreement of the	-				
artic	James 19 LPM	James Di				
artic  iignat	ure of a member or surporized representative of a member	James Di	Printed or typed name o	•		
artic	James 19 LPM	James Du	Printed or typed name o	to comply with th		