L22000119088

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
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Special Instructions to Filing Officer:				





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COVER LETTER

TO: Registration Section Division of Corporations	
JARIBEAR LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Victoria Padron	
Name of Person	
ZenBusiness Inc.	
Firm/Company	
336 E. College Ave. Suite 301	
Address	
Tallahassee, FL 32301	
City/State and Zip Code	
fulfillment@zenbusiness.com	
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, please	se call:
Victoria Padron	844 493-6249
Name of Person	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
Enclosed is a check for the following amo	ount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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.

I. Na	ame of the limited liability company: JARIBEAR LLC				
2. (a)	185 NW 13 AVE APT525, 525 525	(185 NW 13	3 AVE APT525, 525 525	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	MIAMI, FL 33125		MIAMI, FI	. 33125	
	03/08/2022	_	L220001190	88	
3. 5. (a)	Date of filing/registration in Florida ZENBUSINESS INC.	4.		Document number	
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE,			E IL	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 301			(a)	
(b)	TALLAHASSEE, FL	32301			
	ZenBusiness Inc.	25 ST			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>				
	336 E. College Ave. Suite 301				
	NEW Registered Office Address:				
	TALLAHASSEE, FL	32301			
change agent v was/we the arti	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	register bility co f the lin limited	ed office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/ <u>\$</u> Signa	/ Jaritza Suarez ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obl to merc	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I have the change of this change.	ee to ac perform I for in (pereby c	t in this capa ance of my a Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatu	re of Registered Agent				