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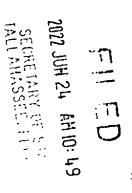
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Office Use Only



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COVER LETTER

TO:		istration Section sion of Corporations			
SUBJE	ECT:	JAM REALTY INVESTMENTS	, LLC		
		Name of Limited Liability Company			
Dear S	ir or N	Madam:			
The end	closec	l Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.	
Please	return	all correspondence concerning	this matter to the	following:	
JESSIC	A ME	RRICK			
		Name of Person		_	
JAM RI	EALT	Y INVESTMENTS, LLC			
		Firm/Company			
3128 W	PAL	METTO STREET			
		Address			
TAMPA	A, FL.	33607			
		City/State and Zip Cod	e		
JESSIC	'A.ME	RRICK7@GMAIL.COM			
Е	-mail	address: (to be used for future a	annual report notif	ication)	
For fur	ther in	nformation concerning this man	ter, please call:		
JESSIC	A ME	RRICK	585 at (490-0161	
		Name of Person	··· \ <u></u>	Area Code & Daytime Telephone Number	
	Reg Divi P.O.	ling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enci	losed is a check for the follow	ing amount:		
	= \$:	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.

2. (a)	ame of the limited liability company: 217 S. CEDAR AVE. TAMPA, FL 33606		(b) 3128 W PALMETTO STREET, TAMPA, FL 33607			
i. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address	of limited liability company; BE POST OFFICE BOX)		
	04/07/2022		2000167032			
3.	Date of filing/registration in Florida	4.	Document nu	ımber		
5. (a)	MERRICK, JESSICA Registered Agent and Registered Office shown on the records of	pt. of State:				
	Registered Office Address (MUST BE FLORIDA STREE) 6340 MOORING LINE CIRCLE	FADDRESS)				
	APOLLO BEACH , F	7L_33572		202 SE TAL		
z E.S	MERRICK, JESSICA			AR T		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office addre	<u>w</u> :	FI ED 1022 JUH 24 AM 10: SECRETARY OF STALLAHASSEELTE		
	NEW Registered Office Address:					
	3128 W PALMETTO STREET			45		
	TAMPA, F	L_33607				
:hange igent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the limited limited.	ne registered of the limited of the limited liab	office and the business any, it is hereby confi d liability company or ility company.	office of the registered rmed that the change(s)		
Signal	are of a member or authorized representative of a member	<u></u>	A MERRICK Printed or types	I name of signee		
I herei provisi he obl o mere	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address. It in writing of this change.	e vertormanc	this capacity. I furthe e of my duties, and I a	r agree to comply with the m familiar with and accept		