Leecoo 269827

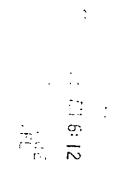
(Requestor's Name)				
(Add	dress)			
(Add	dress)			
(City	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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03/21/21

COVER LETTER

Division of Corporations			
JDSPEX, LLC SUBJECT:	<u> </u>		
	Name of Limit	ed Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Reg	gistered Office Change	and fee(s) are submitted for	filing.
Please return all correspondence co	ncerning this matter to	the following:	
Kylie Conrad & Kayla King			
Name of Pe	erson		
Corp1, Inc.			
Firm/Comp	pany		
7700 E Arapahoe Rd Ste 220			4.
Address			- ن ، ن
Centennial, CO 80112			
City/State and	Zip Code		6: 12
E-mail address: (to be used fo	r future annual report	notification)	
For further information concerning	this matter, please call	l:	
Kylie Conrad	720 at (823-9273	
Name of Person		Area Code & Daytime	e Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporathe Centre of Talla 2415 N. Monroe Stallahassee, FL 32.	ations thassee reet, Suite 810
Enclosed is a check for th	e following amount:		
S25 Filing Fee		☐ \$55 Filing Fee & Certifie	d Conv

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. Na	ime of the limited liability company: JDSPEX, LLC				
2. (a)	612 PALM DRIVE	(b)	(b) 612 PALM DRIVE		
(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)		
	HALLANDALE BEACH, FL 33009	 -	HALLANDALE BEACH, FL 33009		
	06/13/2022	l.	22000269827		
5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	Document number		
, (a)	Registered Agent and Registered Office shown on the records 1201 HAYS STREET	of the Florida E	Pept, of State:		
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS)			
	TALLAHASSEE	FL_32301-252	5		
(b)	Registered Agents Inc				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addr			
	7901 4th St N		6. <u></u>		
	NEW Registered Office Address:				
	Ste 300				
	St. Petersburg	FL 33702			
change ngent v was/we he arti	imited liability company is not organized under the cor changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the ELBAZ	the registered liability comes of the limit the limited lia	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in		
	nure of a member or authorized representative of a member		Printed or typed name of signee		
I here provisi he obi	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	igree to act in ite performan ded for in Ch I hereby con	o this canacity. I further agree to comply with the		
•	vid Roberts				
Signatu	ire of Registered Agent				