## L22000329376

(Req	juestor's Name)	
(Add	Iress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
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		COVER I	ETTER		•	
	tration Section ion of Corporations		-	r	•	
SUBJECT:	JRMG STORE LLC					
_		Name of Limited L	iability Company			_
Dear Sir or M	adam:					
The enclosed	Registered Agent/Registered	Office Change and	fee(s) are submitte	ed for filing.		
Please return :	all correspondence concerning	g this matter to the	following:			
JULIA R. MEI	)EROS GONZALEZ					
	Name of Person					
JRMG STORE	LLC					71
	Firm/Company					904 220 <b>2</b>
6074 FOREST	HILL BLVD 104					)l <sub>2</sub> 2 9
	Address		<del></del>		<u></u>	
WEST PALM	BEACH FLORIDA 33415				Australia Ta	AM III Zb
	City/State and Zip Coc	le				σ
JRMAMAZÓN	N2022(#GMAIL.COM					
E-mail a	iddress: (to be used for future	annual report notif	ication)			
For further inf	formation concerning this mat	ter, please call:				
JULIA R MED	DEROS GONZALEZ	561 at (	577-6839			
<del></del> -	Name of Person	<u> </u>	Area Code & Da	aytime Telepho	ne Numb	er
Regis Divis P.O.	ing Address: stration Section sion of Corporations Box 6327 hassee, FL 32314		Street Addres Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	Section orporations `Tallahassee roe Street, Sui	te 810	

Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

## 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.

	ime of the limited liability company:   JRMG STORE L.	L.C		607 L E()D	REST HILL I	DI 3/15 A 1	DT 101	
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)		Mailing addre		d habilit	
	WEST PALM BEACH			WEST PA	LM BEACI	1		
	FLORIDA 33415			FLORIDA	. 33415			
	07/26/2022		Į.	.220003293	376			
. (a)	Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC.	4.	_		Document	number		
(41)	Registered Agent and Registered Office shown on the records of 5575 S. SEMORAN BLVD.SUITE 36	the Flo	rida	Dept. of Stat	e:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	::SS)		_			
	ORLANDO FI	32822			_			
(b)	JULIA ROSA MEDEROS GONZALEZ				_		2022 AUG	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office	add	ress:		:-	<b>A</b> UG	- 포유해 설립
	6074 FOREST HILL BLVD				_	5	29	, 25 27670 47270
	NEW Registered Office Address:						AH III:	6,69
	104				_	- · · · · · · · · · · · · · · · · · · ·	II: 2	
	WEST PALM BEACH FI	33415			_	•	ß	
ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist ability of the l limite	erec cor imi d lia	I office and appears, it is ted liability ability con-	d the busing s hereby co y company	ess office nfirmed t or as othe	of the i hat the	registered change(s)
Signat	nature of a member or authorized representative of a member			Printed or typed name of signee				
herel rovisi ie obli mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a chafige in the registered office address. It fin writing of this change.	rec to a perfor d for it hereby	ict i mai n Ci coi	n this cape nce of my c hapter 605 nfirm that i	acity I fiw	ther agree	· In con	mbe with .

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent