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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

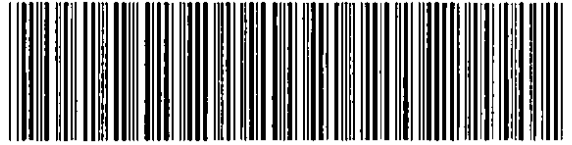
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JMA Advancement Consulting Services

Julie Althaver
Owner

3543 Sabal Springs Blvd.
N. Fort Myers, FL 33917
239-955-2912
jalthaver.jmaacs@gmail.com
juliealthaver@gmail.com

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

August 1, 2023

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam,

Enclosed, please find my completed cover letter and Statement of Change of Registered Office or Registered Agent form, along with my payment for this change. My business: JMA Advancement Consulting Services changed my registered agent from United States Corporation Agent, INC- Cheyenne Moseley to Jim Spires, Spires and Associates, 12734 Kenwood Lane, #25, Fort Myers, FL 33907.

If you have any questions, please call me at 239-955-2912.

Thank you for your help in changing the registered agent for my business.

Sincerely,



Julie Althaver
Owner
JMA Advancement Consulting Services
3543 Sabal Springs Blvd.
N. Fort Myers, FL 33917

Enc: Cover Letter, Statement of Change Registered Agent and check for \$25 filing fee

JMA Advancement Consulting Service
3543 Sabal Springs Blvd., N. Fort Myers, FL 33917
239-955-2912

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JMA Advancement Consulting Services

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 matter to the following:

Julie Althaver

Name of Person

JMA Advancement Consulting Services

Firm/Company

3543 Sabal Springs Blvd

Address

North Fort Myers, FL 33917

City/State and Zip Code

jalthaver.jmaacs@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Althaver

239 955-2912
at ()

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 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.

1. Name of the limited liability company: JMA Advancement Consulting Services *LLC*
2. (a) JMA Advancement Consulting Services
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
3543 Sabal Springs Blvd
North Fort Myers, FL 33917
- (b) JMA Advancement Consulting Services
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3543 Sabal Springs Blvd
N. Fort Myers, FL 33917
3. August 25, 2022 4. L22000373811
Date of filing/registration in Florida Document number
5. (a) United States Corporation Agents, INC- Cheyenne Moseley
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
United States Corporation Agents, INC
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
5575 S. Semoran Blvd, Suite #36
Orlando, FL 32822
- (b) Spires and Associates, P.A.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Spires & Associates - Jim Spires
NEW Registered Office Address:
12734 Kenwood Lane, #25
Fort Myers, FL 33907

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Julie Althaver
Signature of a member or authorized representative of a member

Julie Althaver

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jan W. [Signature]
Signature of Registered Agent