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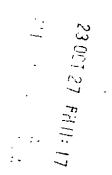
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Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer: J. HORNE					
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
J & E Bookkeeping LLC SUBJECT:	
	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Dalisa Fernandez	
Name of Person	<u> </u>
J & E Bookkeeping LLC	
Firm/Company	
7024 Spring Hill Road	
Address	
Sebring FL 33876	
City/State and Zip Code	
jebookkeepingllc@gmail.com	
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call:	
Dalisa Fernandez 863	345-2150
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
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.

1. Na	ame of the limited liability company: J & E Bookkeepii	ng LL	С						
2. (a)	7024 Spring Hill Road	(b) 7024 Spring Hill Road							-
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0		Mailing addre				
	Scbring FL 33876	_		Sebring I	FL 33876				- ′
									
	10/14/2022	_	I	.2200044	3161				
3.5. (a)	Date of filing/registration in Florida Dalisa Fernandez	4.			Document	number	-		
(-)	Registered Agent and Registered Office shown on the records of 128 Fairway Drive	the Flo	rida .	Dept. of Sta	ate:				
	Registered Office Address (MUST BE FLORIDA STREET)	4DDR	ESS)		- -				
	Lake Placid . FL	33852	<u>)</u>		_				
(b)	Dalisa Fernandez				_				
	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress;					
	7024 Spring Hill Road							Ņ	
	NEW Registered Office Address:				_			3 00	
					_			10.1	
	Sebring , FL	33876	,		_			2	•
agent w was/wei	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of these of organization or the operating agreement of the law.	regist bility f the I imite	ered com imit d lia	office an pany, it i ed liabilit	nd the busines is hereby con ty company c npany.	s office	of the	registe	red
Signatu	tre of a member or authorized representative of a member				Printed or typ	ed name o	of signe		
he oblig to merel notifi ed	y accept the appointment as registered agent and agreent of all statutes relative to the proper and complete pations of my position as registered agent as provided y reflect a change in the registered office address, I his in writing of this change. A Control of Registered Agent	e to a perfor for in ereby	ict ir man i Ch con	this cap ce of my apter 605 firm that					th the accept g filed een

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