## LZZ 000 463281

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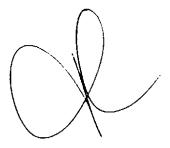




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2023 COT 30 THE SHZ 8



## **COVER LETTER**

Division of Corporations						
SUBJECT: TN Capital Ventures,	LLC . ability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and t	ec(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
rease return an correspondence concerning this matter to the is	onowing.					
JANETTE NUNEZ - VICIOSO Name of Person	_					
JIN CAPITAL VENTURES LLC. Firm/Company	_					
12429 ROCK RIDGE LANE Address	1 1 10 10 10 10 10 10 10 10 10 10 10 10					
FORT MYERS, FL 33913 City/State and Zip Code						
INGODGIFT @ GMAIL. COM  E-mail address: (to be used for future annual report notific	<del>ca</del> tion)					
For further information concerning this matter, please call:						
JANETIE NUNEZ- VICTOSO at 484  Name of Person	) 400 3963 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:						

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

**⅓**\$25 Filing Fee

## 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.

	me of the limited liability company: JN CHPIT				RIDGE LANE
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b	· <del></del>	ailing address of lim	oited liability company:  OST OFFICE BOX
	FORT MYERS, FL 33913	_	FORT	myeks,	FL 33913
	OCTOBER 27th 2022	_	L22	000 4632	281
3.	Date of filing/registration in Florida	4.	I	Ocument numbe	er
5. (a)					
	Registered Agent and Registered Office shown on the records of th	ne Florida	Dept. of State:		
	ZENBUSINESS INC.				20
	Registered Office Address (MUST BE FLORIDA STREET A		1	:	2023 C X
	336 E. COLLEGE AVE. ST. 30	<u> </u>			
	TAUAHASSEE FL.	323	301		3 0
(b)	JANETTE NUNEZ-VICIOSO				73 Vg
( )	Enter name of NEW Registered Agent and/or NEW Registered G	Office ado	tress:		28
	15429 ROCK RIDGE LAME				
	NEW Registered Office Address:				
	FORT MYERS FL	33	39/3		
change agent v was/we tho arti	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of clestof organization or the operating agreement of the liabers.	registere pility con the limi	d office and npany, it is l ited liability	the business offi nereby confirmed company or as o	ice of the registered d that the change(s)
y.	ture of a member or authorized representative of a member	JA	NETTE	NUNEZ	- VICIDSO
				• •	•
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I hi I in writing of this change.	e to act performa for in C preby co	in this capac nce of my di hapter 605, nfirm that th	aty. I further ag tiles, and I am fa F.S. Or, if this a e limited liabilit	ree to comply with the imiliar with and accept locument is being filed v company has been

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