Florida Department of State Division of Comporations Electronic Filing Cover Sheet

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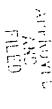
Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE JNJ'S TOWING L.L.C.

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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	nne of the limited liability company:	••		
2. (a)	10818 pathfinder trail	_ (b)	
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lakeland,Florida (US)33809	_		
	11/4/2022 12:00:00 AM	-	L22000474	562
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LEGALING CORPORATE SERVICES INC.			
). (a)	Registered Agent and Registered Office shown on the records of the 476 Riverside Ave.	he Florid	la Dept. of Sta	e:
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRES</u>	<u>S)</u>	
	Jacksonville , FL	32202		_
(b)	Corporate Creations Network Inc.			2023 DEC
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (Office a	ddress:	. RC
	801 US Highway 1			8
	NEW Registered Office Address:			PM 2:
	V. d. D.I., D. d.	22.100		_
	North Palm Beach , FL	33408		_
change agent v was/wo	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 lial are authorized by an affirmative vote of the members of the solution of the levels of organization of the operating agreement of the l	register bility of f the lir	ed office ar ompany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
		Dar	iielle W. Gos	sman, Special Manager
_	ture of a member or authorized representative of a member			Printed or typed name of signee
	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	2 - 2 2 - 6 - 2 4 - 2 B	canaa of ma	dution and I am tamilian with and account
notified	d in writing of this change. Danielle Go	ssmai	n, Special S	Secretary
Signatu	re of Registered Agent			