

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
1	
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Office Use Only	





COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI			
	N	lame of Limited I	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered C	Office Change and	d fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the	e following:
Camer	on Biddy		
	Name of Person		
ZenBu	siness Inc.		
	Firm/Company	1,	
336 E.	College Ave. Suite 301		
	Address		
Tallaha	assee, FL 32301		
	City/State and Zip Code	2	
ra@zei	nbusiness.com		
E	-mail address: (to be used for future a	innual report noti	fication)
For fu	rther information concerning this matt	er, please call:	
Camer	on Biddy	844 at (493-6249
	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	ng amount:	
	■ \$25 Filing Fee	a :	\$55 Filing Fee & Certified Copy
INHSI	8 (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	une of the limited liability company: JCFL, LLC							
2. (a)	806 EAST WINDWARD WAY	,	(b)	806 EA	AST WINDWARD	WAY		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '	(-)		Mailing address of (Note: MAY B)			
	#103	_		#103	_			
	LANTANA, FL 33462	_		LANTA	ANA, FL 33462			
	01/05/2023		I	_230000	012569			
3.	Date of filing/registration in Florida	4.	_		Document nur	nber		
5. (a)	PARDO, ESQ, JOSEPH I					- -ì	2	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 100 SOUTHEAST SECOND ST			State:	\$100 c	2024 APR 16		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE 2050					16 PM		
	MIAMI , FL	33131	_	-			$\ddot{\sim}$	
(b)	ZenBusiness Inc. Enter name of NEW Registered Agent and/or NEW Registered 6	Office #	ddi	'ess:		1616 (201	05	
	336 E. College Ave,			<u></u> -				
	NEW Registered Office Address:							
	Suite 301							
	Tallahassee , FL	32301						
change agent v was/we the 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 cles of organization or the operating agreement of the least by Chiminan.	registe bility of the linited	red on mit lia	office pany, i ed liab bility c	and the business of it is hereby confinitity company or a company.	office of th med that th	ie regist ie chan	ered ge(s)
	oseph P Cirigliano ture of a member or authorized representative of a member	70:	sep	h P Ciri	Printed or typed	name of sign	ice	
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. The of Registered Agent	ee to ac perforn for in ereby c	ct it nar Ch con	n this c ace of n apter (firm th	apacity. I further	agree to c	omply v	with the d accept ng filed been

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