

L23 0000 438 02

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

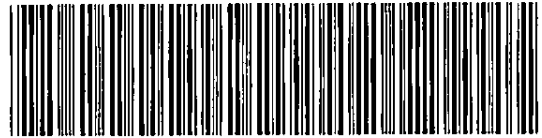
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300408008123

05/02/23--01022--001 **25.00

2023 JUN -2 10:11:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JBE Management LLC
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:

Christine A. Hunt

Name of Person

CAMP & CAMP PA

Firm/Company

111 SE 12th Street

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

realestate@campandcamplaw.com

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

For further information concerning this matter, please call:

Christine A. Hunt

954

524-8111

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.

JBE Management LLC	
1. Name of the limited liability company: _____	
2350 SW 23rd Terr., Fort Lauderdale FL 33312	2350 SW 23rd Terr., Fort Lauderdale FL 33312
2. (a) _____ Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) _____ Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
_____	_____
_____	_____
01/27/2023	L23000043802
3. _____ Date of filing/registration in Florida	4. _____ Document number
Jessica Faber	
5. (a) _____ Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
2131 SW 23rd Terrace	
Fort Lauderdale	33312
_____ FL _____	
(b) _____ Enter name of NEW Registered Agent and/or NEW Registered Office address :	
NEW Registered Office Address:	
2131 SW 23rd Terrace	
Fort Lauderdale	33312
_____ FL _____	

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.

Jessica Faber

Jessica Faber Jessica Faber

Signature of a member or authorized representative of a member

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.

Jessica Faber

Signature of Registered Agent

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