## L23000 127002

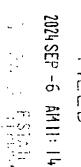
(Requestor's Name)
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## COVER LETTER

TO: Registration Section Division of Corporation	ons		
JS ORIGINS LLC SUBJECT:		ne of Limited I	Liability Company
Des Circa Madam	, , ,	no or Emmod .	satisfies of the same of the s
Dear Sir or Madam:			
The enclosed Registered Ager	t/Registered Off	ice Change and	I fee(s) are submitted for filing.
Please return all corresponden	ce concerning thi	is matter to the	following:
Jasmine Sung			
Name	of Person	· · · · · · · · · · · · · · · · · · ·	<del></del>
Firm/	Company		
117 Reserve Circle Apt 205			
Ado	lress		<del></del> -
Oviedo, FL 32765			
City/State	and Zip Code		<del>-</del>
info@mycorpadvantage.com			
E-mail address: (to be us	ed for future ann	nual report noti	fication)
For further information conce	ming this matter,	, please call:	
Carl Thurgood		385 at (	350-3500
Name of Pers	on		Area Code & Daytime Telephone Number
Mailing Address:			Street Address:
Registration Section			Registration Section
Division of Corpora	tions		Division of Corporations
P.O. Box 6327			The Centre of Tallahassee
Tallahassee, FL 323	14		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check f	or 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.

Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  4TH STREET N SUITE 300  PETERSBURG, FL 33702		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  4TH STREET N SUITE 300		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
4TH STREET N SUITE 300	7001 ATH	
PETERSBURG, FL 33702	/701 4111	STREET N SUITE 300
	ST. PETE	ERSBURG, FL 33702
6/2023	L23000127	7002
	4.	Document number
tered Agent and Registered Office shown on the records of th	e Florida Dept. of Sta	ate:
stered Office Address (MUST BE FLORIDA STREET A	DDRESS)	_
RESERVE CIR APT 205		_ 2
JEDO , FL	32765	7024 SEP
CNUW Devices and Agent and/or NEW Registered (	Office address:	PICED RES
GISTERED AGENTS INC		
№ Registered Office Address:		프라 -
1 4TH STREET N SUITE 300	·	· 
PETERSBURG FL.	33702	
hanges are made, the Florida street address of the be identical. Or, in the case of a Florida limited lia uthorized by an affirmative vote of the members of organization or the operating agreement of the last mine.	bility company, it f the limited liabil limited liability co	is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.  Printed or typed name of signee
The state of the s	RESERVE CIR APT 205  EDO FL  mame of NEW Registered Agent and/or NEW Registered of STERED AGENTS INC  Registered Office Address:  4TH STREET N SUITE 300  PETERSBURG FL  d liability company is not organized under the law ranges are made, the Florida street address of the elidentical. Or, in the case of a Florida limited lia thorized by an affirmative vote of the members of organization or the operating agreement of the law amended in the registered agent and agree fall statutes relative to the proper and complete ons of my position as registered agent as provided flect a change in the registered office address. The printing of this change.	ered Agent and Registered Office shown on the records of the Florida Dept. of Sta G. JASMINE  Reced Office Address (MUST BE FLORIDA STREET ADDRESS)  RESERVE CIR APT 205  EDO , FL  32765  EDO , FL  32765  ISTERED AGENTS INC  Registered Office Address:  4TH STREET N SUITE 300  PETERSBURG , FL  33702  I liability company is not organized under the laws of the State of Florida street address of the registered office a cidentical. Or, in the case of a Florida limited liability company, thorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability company is member of authorized representative of a member  (SMINE UNG)  Jasmine Sung  a member of authorized representative of a member  cept the appointment as registered agent and agree to act in this company position as registered agent as provided for in Chapter of filest a change in the registered office address, I hereby confirm the criting of this change.