

L23000127002

(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.

J. HORNE  
SEP 12 2024

Office Use Only



100435950151

09/06/24--01014--001 \*\*25.00

FILED  
2024 SEP -6 AM 11:14  
J. HORNE Filing Officer

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JS ORIGINS 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:

Jasmine Sung

Name of Person

Firm/Company

117 Reserve Circle Apt 205

Address

Oviedo, FL 32765

City/State and Zip Code

info@mycorpadvantage.com

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

For further information concerning this matter, please call:

Carl Thurgood

at ( 385 ) 350-3500

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.*

1. Name of the limited liability company: JS ORIGINS LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
7901 4TH STREET N SUITE 300  
ST. PETERSBURG, FL 33702

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
7901 4TH STREET N SUITE 300  
ST. PETERSBURG, FL 33702

3. 03/13/2023 Date of filing/registration in Florida

4. L23000127002 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

SUNG, JASMINE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

117 RESERVE CIR APT 205

OVIEDO, FL 32765

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

REGISTERED AGENTS INC

NEW Registered Office Address:

7901 4TH STREET N SUITE 300

ST. PETERSBURG, FL 33702

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.

Jasmine Sung  
Signature of a member or authorized representative of a member

Jasmine Sung

Printed or typed name of signee

*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.*

Bill Hame  
Signature of Registered Agent

FILED  
2024 SEP -6 AM 11:14  
STATE  
TALLAHASSEE, FLORIDA