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INHS18 (2/14)

COVER LETTER

Division of Corporations		
2 JBR Construction Services LLC SUBJECT:		
	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Juan Luis Perez Boza		
Name of Person		
2 JBR Construction Services		
Firm/Company		
8145 NW 7th St Apt 504	,	
Address		
Miami, FL, 33126		
City/State and Zip Code		
2jbrconstructionservices@gmail.com		
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter, pleas	e call:	
Juan Luis Perez Boza at	786 3017082	
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 amou	unt:	
■ \$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.

I. N	ame of the limited liability company: 2 JBR Construct	ion Services				
2. (a)	8145 NW 7th St Apt 504, Miami, FL, 33126	15 NW 7th St Apt 504, Mi	7th St Apt 504, Miami, FL, 33126			
- (**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3.	March 22, 2023 Date of filing/registration in Florida	4.	00146809 Document numb	oer .		
5. (a)						
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) 7901 4th St N STE 300		of State:	2024 APR -9 PM 3	7	
	ST. Petersburg	L_33702		-		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> NEW Registered Office Address:	d Office address:		PM 3: 02		
	8145 NW 7th St. Apt 504					
	Miami . F	L 33126				
change agent was/w the art Signa I here provis the obto mer notifie	limited liability company is not organized under the late or changes are made, the Plorida street address of the will be identical. Or, in the case of a Florida limited latered authorized by an affirmative vote of the members icles of organization or the operating agreement of the attree of a member examined and agreement are possible to the proper and complete ligations of my position as registered agent as provided in writing of this change if	aws of the State e registered off iability compar of the limited le e limited liabili	ice and the business offiny, it is hereby confirme iability company or as ty-company. Printed or typed na	fice of the regised that the charotherwise prov	stered nge(s) ided in	

FILING FEE: \$25.00

INHS18 (2/14)