

L23000189624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jacksonville-miami cabinet install 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:

Melanie Jones
Name of Person

Firm/Company

2670 SE 67th St LLC
Address

Ocala FL 344180
City/State and Zip Code

Jax.mia.cabinetinstall@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melanie Jones at (305) 782-4976
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: Jacksonville-Miami cabinet install LLC

2. (a) _____
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

9311 Se maricamp rd #1046
ocola FL 321172

4.17.23

Date of filing/registration in Florida

(b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

9311 Se maricamp rd #1046
ocola FL 321172

L23000189624

Document number

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

United States Corporation Agents Inc
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1746 BUNCSIDE AVE
JACKSONVILLE FL 32202

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

2620 Se 67th St Ldc
NEW Registered Office Address:

ocola FL 32480

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.

[Signature]
Signature of a member or authorized representative of a member

Melanie Jones
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.

[Signature]
Signature of Registered Agent

SECRET
TALLAHASSEE
2023 APR 20 PM 1:11
F117D