L23000345146

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COVER LETTER

FO: Registration Section Division of Corporations						
JCNJ Logistics LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Joseph Smith						
Name of Person						
JCNJ Logistics LLC						
Firm/Company						
723 Newell st E						
Address						
Lehigh Acres, FL 33974						
City/State and Zip Code						
jsmith239122@gmail.com						
E-mail address: (to be used for future annual repo	rt notification)					
For further information concerning this matter, please c	all:					
Joseph Smith 22	39 722-1193)					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec. 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	ı:					
1 S25 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.

1. N	ame of the limited liability company: JCNJ Logistics LI	LC		· · · · · · · · · · · · · · · · · · ·
2. (a)		(b)	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,-	, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	723 Newell st E			
	Lehigh Acres, FL 33974	_		
	7/21/23	:	L23000345	146
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				_ ~3
	Registered Agent and Registered Office shown on the records of INC Authority RA	the Florida	Dept. of Stat	e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- ∴ ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
	390 North Orange Ave STE 2300-N	390 North Orange Ave STE 2300-N		
	Orlando FL	32801		
	r L	·		
	Enter name of NEW Registered Agent and/or NEW Registered Camilla J. Smith			_
	NEW Registered Office Address: 723 Newell st E			
	725 (Newell St 12			_
	Lehigh Acres, FL	33974		_
chang ag <mark>e</mark> nt was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia gere authorized by an affirmative vote of the members of tides of organization or the operating agreement of the	registere bility cou of the limi	d office an upany, it is ted liabilit	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
	and the	Josep	h Smith	
Signa	attye of a member or authorized representative of a member			Printed or typed name of signee
armie	thy accept the appointment as registered agent and agricons of all statutes relative to the proper and complete digations of my position us registered agent as provided rely reflect a change in the registered office address. I had in writing of this change.	nortorma	nce of nov.	dution and Lam Tamilian with and accom
$(\bigcup_{\ell}$	und a sufficient of Registered Agent			

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

Electronic Articles of Organization For Florida Limited Liability Company

L23000345146 FILED 8:00 AM July 21, 2023 Sec. Of State

Article I

The name of the Limited Liability Company is: JCNJ LOGISTICS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

723 NEWELL ST E LEHIGH ACRES, FL. US 33974

The mailing address of the Limited Liability Company is:

723 NEWELL ST E LEHIGH ACRES, FL. US 33974

Article III

The name and Florida street address of the registered agent is:

INC AUTHORITY RA 390 NORTH ORANGE AVE., STE 2300-N ORLANDO, FL. 32801

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: TREVOR ROWLEY

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR JOSEPH SMITH 723 NEWELL ST E LEHIGH ACRES, FL. 33974 US L23000345146 FILED 8:00 AM July 21, 2023 Sec. Of State olsimmons

Signature of member or an authorized representative

Electronic Signature: JOSEPH SMITH

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.