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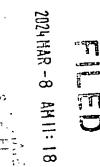
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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February 24, 2024

JAWARA ELLIS 195 VALOR DR. APT. 101 SE PALM BAY, FL 32909

SUBJECT: JAY FORM SERVICES LLC

Ref. Number: L23000482199

We have received your document for JAY FORM SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 6 (850) 245-6050.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 524A00004093

Rec 3/a MO

## COVER LETTER

TO: Registration Section Division of Corporations  SUBJECT:   Tay Form Services LLC  Name of Limited Liability Company	
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:	
Jawara EUVs Name of Person	
Jay Form Services LLC Firm/Company	2024 HAR
195 Valor Dr. Apt. 101 SE	~-8 AM
Palm Bay, FL. 32908 City/State and Zip Code	<del></del> <del></del> <del></del> <del></del>
Jaeez 96 hotmail.com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tawara ELLS at 321 549 - 1430 Name of Person Area Code & Daytime Telephone Number	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303	
Enclosed is a check for the following amount:	

☐ \$55 Filing Fee & Certified Copy

☐ \$25 Filing Fee

## 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. Na	ame of the limited liability company: Jay Form Services LLC
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  1204 Sexton Ld. Sw falm Bay, Ft. (b)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  329
3.	10/20/2023
5. (a)	
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Love the Dobson / Republic Registered Agent LLC  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1150 NW 72nd Ave Tower 1, Ste 455  Miami FL 33126
	Palm Bay FL 32908
chang agent was/w the art	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the cor changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.  Printed or typed name of signee  They accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed rely reflect a change in the registered office address. I hereby confirm that the limited liability company has been address this change.
Signor	ore of Registered Agent