

L23000482199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

☐

MAIL

(Business Entity Name)

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Certificates of Status _____

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STATE OF
S. C. FILE

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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 (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 524A00004093

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jay Form Services 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:

Jawara Ellis
Name of Person

Jay Form Services LLC
Firm/Company

195 Valor Dr. Apt. 101 SE
Address

Palm Bay, FL 32908
City/State and Zip Code

Jaez-9@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jawara Ellis at (321) 549-1430
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

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TALLAHASSEE, FL

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: Jay Form Services LLC
2. (a) 1204 Sexton Rd. SW Palm Bay, FL. (b) 1204 Sexton Rd. SW Palm Bay, FL.
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) 32908 (Note: MAY BE POST OFFICE BOX) 32908

3. 10/20/2023 Date of filing/registration in Florida 4. L23000482199 Document number

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

Lovette Dobson / Republic Registered Agent + LLC
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1150 NW 72nd Ave Tower 1, ste 455
Miami, FL 33126

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

1204 Sexton Rd. S.W.
NEW Registered Office Address:

Palm Bay, FL 32908

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

Jawara Ellis
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

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TALLAHASSEE, FL
DIVISION OF CORPORATIONS