3/27/25, 10:04 AM

Division of Corporations



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(((H250001132113)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070

Fax Number

: (888)462-3453 : (877)919-2613

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Enter the email address for this business entity to be used for future ቸር annual report mailings. Enter only one email address please.

Émail Address:____

efile1234@incfile.com

LLC REGISTERED AGENT CHANGE JARA TRADING LLC

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(((H25000113211 3)))

TO: Registration Section Division of Corporations				
SUBJECT:	JARA TRADING LLC			
	ne of Limite	d Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ice Change :	and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	is matter to t	he following:		
LOVETTE DOBSON				
Name of Person				
Firm/Company				
17350 STATE HWY 249 STE 220				
Address		······		
HOUSTON, TX 77064				
City/State and Zip Code				
efile1234@incfile.com				
E-mail address: (to be used for future ann	ual report no	otification)		
For further information concerning this matter,	please call:			
LOVETTE DOBSON	1 at ((888) 462-3453		
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		
		(((H2500011		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H25000113211 3)))

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.	Same of the limited liability company:	LEC	
2. (a	451 E ALTAMONTE DR STC 1-45	(b) 451 E AUI	FAMONTE DR STE 1445
2 . (u	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		viaiting address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ALTAMONTE SPRINGS, FL 32701	ALTAMO	NTE SPRINGS, FL 32701
٠	02/28/2024	L240001948	84
3.	Date of filing/registration in Florida	4.	Document number
5. (a	XAVIER R JARA		
٥. ره	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of State	<u>.</u> ::
	451 E ALTAMONTE DR STE 1445	•	
	Registered Office Address (MUST BE FLORIDA STREET.	(DDRESS)	
Ŀ	ALTAMONTE SPRINGS FI	32701	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			· 20 H
(b	REPUBLIC REGISTERED AGENT LLC	·	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	· · · · · · · · · · · · · · · · · · ·
	1150 Nw 72nd Ave Tower 1 Ste 455		ر ن کا ن
	NEW Registered Office Address:		•
	<u> </u>		
,			
•	Miami . FL	33126	
chang agent was/v the ar	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered office and bility company, it is fithe limited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
provi. the ol to me	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address. I had in writing of this change.	urformance of my a	luties, and I am familiar with and accept.
Signa	ure of Registered Agent	•	(((H25000113211 3)))