## M08000001119

(Red	questor's Name)						
(Add	dress)						
(Address)							
(Cit	y/State/Zip/Phone	· #)					
PICK-UP	WAIT	MAIL					
(Bu	siness Entity Nam	ne)					
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to Filing Officer:							

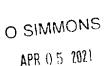




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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: February 12, 2021

Order#: 647065-016

Re: JIMMY JOHN'S FRANCHISE, LLC

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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	me of the limited liability company: JIMMY JOHN	I'S FRANC	CHISE, LLC			
2.	(a)	2212 Fox Drive  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(	(b)	Mailing address of limite	ed liabili	ity company:
		Champaign, IL 61820					
		03/07/2008		M0800000	1119		
<ul><li>3.</li><li>5.</li></ul>	(a)	Date of filing/registration in Florida Cogency Global Inc.	4.		Document number		
J. (u	(4)	Registered Agent and Registered Office shown on the records 115 North Calhoun Street, Suite 4	of the Floric	da Dept. of State	- ::		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
		Tallahassee	FL32960	)	-		2021 FEB
(b)	(b)	Enter name of NEW Registered Agent and/or NEW Register  Corporation Service Company	red Office a	ddress:	-	•	EB 15 PM
		NEW Registered Office Address: 1201 Hays Street			-		2:32
		Tallahassee	32301 FL	·	-		
cha age was	inge ent w s/we	mited liability company is not organized under the lor changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members of organization or the operating agreement of the	he register liability co s of the lir	ed office and ompany, it is nited liability	I the business office hereby confirmed to company or as oth	of the	registered change(s)
78/ Jul Chin			Jill	Cilmi, Autho			
I h pro the to r	eret visio obli nere	ure of a member or authorized representative of a member by accept the appointment as registered agent and a constant of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, in writing of this change.		t in this capa jance of my a Chapter 605, onfirm that to tion Service		_	
Sig	natur	e of Registered Agent	•		st. Vice President		