

M0900000 4383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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RA Change

JAN 15 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JACKSONVILLE SPORTS GROUP 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:

KEVIN WEZNIAK

Name of Person

JACKSONVILLE SPORTS GROUP, LLC
Firm/Company

1000 W. BAY STREET
Address

JACKSONVILLE, FL 32204
City/State and Zip Code

KEVIN@jaxsharks.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN WEZNIAK at (904) 900-2060
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 31, 2019

KEVIN WEZNIAK
JACKSONVILLE SPORTS GROUP, LLC
1000 W BAY STREET
JACKSONVILLE, FL 32204

SUBJECT: JACKSONVILLE SPORTS GROUP, LLC
Ref. Number: M09000004383

We have received your document for JACKSONVILLE SPORTS GROUP, 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 Limited Partnership/Limited Liability Limited Partnership, but your entity is a Limited Liability Company. 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.

Diane Cushing
Senior Section Administrator

Letter Number: 719A00022539

**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.

Name of the limited liability company: JACKSONVILLE SPORTS GROUP, LLC

(a) JACKSONVILLE SPORTS GROUP, LLC (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)

1000 W. BAY STREET
JACKSONVILLE, FL 32204

11/5/2009

Date of filing/registration in Florida

4.

MO9000004383

Document number

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

1705 HIGHLAND VIEW DRIVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

ST. AUGUSTINE, FL 32092

(b) KEVIN WEZNIAK
Enter name of NEW Registered Agent and/or NEW Registered Office address:

JACKSONVILLE SPORTS GROUP, LLC

NEW Registered Office Address:

1000 W BAY ST

JACKSONVILLE, FL 32204

REMOVE
OLD
AGENT.
NO LONGER ASSOCIATED
WITH COMPANY.

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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

KEVIN A. WEZNIAK

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

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00