2/11/25, 3:53 PM

Division of Corporations

## Department of State

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From:

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Account Number : FCA000000023 Phone : (614)289-3338 Fax Number : (614)573-3996

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## LLC REGISTERED AGENT CHANGE JS DIAMOND ENTERPRISES LLC

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## 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. N	ame of the limited liability company:		1.6600.63	Collins Asses
2. (a)		(b	)	follins Ave
	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	#1103		#1103	
	Sunny Isles Beach, FL 33160	<u> </u>	Sunny Is	les Beach, FL 33160
	02/08/2013		M1300000	00883
3. 5. (a) (b)	Date of filing/registration in Florida JOHN KASTNER	4.		Document number
	Registered Agent and Registered Office shown on the records of t 16690 Collins Ave	he Florid:	Dept, of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS	2	_ <b>2</b>
	Sunny Isles Beach FL	33160		F1 2025 FEB SECRA 1. I ALL ASH
	C T Corporation System			56. <b>二</b> 十
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	NEW Registered Office Address:			
	1200 South Pine Island Road		·= ····	_
	Plantation FL	33324		_
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	es of the the regional shility co to the lim limited l	stered offi impany, it ited liabil iability ec	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
	/s/Joshua Diamond	Josh	ua Diamen	Printed or typed name of signee
I here provis the ob- to mei notific	ature of a member or authorized representative of a member or authorized representative of a member appointment as registered agent and agrations of all statutes relative to the proper and complete digations of my position as registered agent as provided all reflect a change in the registered office address, I had in writing of this change.  CT Corporation System and Emerical Assistant Secretary	ec to act perform l for in ( tereby c	in this ca ance of m Thapter 60 onfirm tha	macity. I further ourse to comply with the