M14000006802

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s 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: September 3, 2020

Order#: 400107-014

Re: JEFF 1, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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.

OUCA.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. 1	Name of the limited liability company:	2		
2. (a	5001 Plaza on the Lake, Suite 200	(b)		
2. (2	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Austin, TX 78746			
	09/22/2014	M	14000006802	
3.	Date of filing/registration in Florida	4.	Document number	
5. (Capitol Corporate Services, Inc.			
S. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	515 East Park Avenue, 2nd Floor			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	Tallahassee	_{EI} 32301		
	Enter name of NEW Registered Agent and/or NEW Registered Agent and A	ered Office addre	<u> </u>	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	, FL		
chan agen was/	e limited liability company is not organized under the ge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the membe rticles of organization or the operating agreement of	the registered of d liability comp ers of the limited	office and the business office of the registered any, it is hereby confirmed that the change(s) deliability company or as otherwise provided in	
	/s/ Jill Cilmi		ni, Authorized Person	
	nature of a member or authorized representative of a member		Printed or typed name of signee	
prov the o	reby accept the appointment as registered agent and isions of all statutes relative to the proper and complobligations of my position as registered agent as proverely reflect a change in the registered office address and in writing of this change.	agree to act in lete performanc ided for in Cha s, I hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been	
,	Cerm Ker	Corporation	Service Company	
Sign	ature of Registered Agent	Ami M. Cas	per, Asst. Vice President	