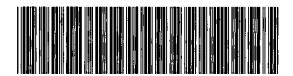
## M1700000508

| (Re                     | questor's Name)  |             |
|-------------------------|------------------|-------------|
| (Ad                     | dress)           |             |
| (Ad                     | dress)           |             |
| (Cit                    | y/State/Zip/Phon | e #)        |
| <u></u>                 | ☐ WAIT           | MAIL        |
| (Bu                     | siness Entity Na | me)         |
| (Do                     | cument Number    | )           |
| Certified Copies        | _ Certificate    | s of Status |
| Special Instructions to | Filing Officer:  |             |
|                         |                  |             |
|                         |                  |             |
|                         |                  |             |
|                         |                  |             |

Office Use Only



100300828111

07/05/17--01015--008 \*\*25.00



D. SCOTT JUL 7 2017

## COVER LETTER

| TO: A Registration Section Division of Corporations                                                                                                                                                                                                       |                                    |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--|
| SUBJECT: JJCJ Fam. Hoblings LLC  Name of Limited Liability Company                                                                                                                                                                                        | <del></del>                        |  |
| 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:                                                                                                                                                                                 |                                    |  |
| Jeffrey A Ashten Name of Person                                                                                                                                                                                                                           |                                    |  |
| JJCJ Family Holdings, LLC Firm/Company                                                                                                                                                                                                                    |                                    |  |
| 2001 Alaqua Lakes Blud. Address                                                                                                                                                                                                                           | - 155 <b>-</b> 1                   |  |
| Longwood, FL 32779  City/State and Zip Code                                                                                                                                                                                                               | FILED JUL-5 PH 12: 27              |  |
| E-mail address: (to be used for future annual report notification)                                                                                                                                                                                        |                                    |  |
| For further information concerning this matter, please call:                                                                                                                                                                                              | 7.5                                |  |
| Teff Ashton at (407) 416-9402  Name of Person Area Code & Daytime Telephone                                                                                                                                                                               | <br>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 & Certified Copy                                                                                                                                                                                                                          | □ \$55 Filing Fee & Certified Copy |  |

INHS18 (2/14)

## 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: JJCJ Fam. 14 Holdings, LLC                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 2. (a)                                   | 2001 Alaque Lakes Blud (b) 2001 Alaque Lakes Blue                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                          | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OF FICE BOX)                                                                                                                                                                                                                                                                                                                      |
|                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                          | Longwood, FL 32779 2001 Aleque Lettes Blud                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                          | 1/18/17 M 17000000 508                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 3.                                       | Date of filing/registration in Florida 4. Document number                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 5. (a                                    | Jeffrey A Ashton                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| ,                                        | Registered Agent and Registered Office shown on the records of the Florida Dept. of State:                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                          | 3353 Ockmont Terrece                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                          | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                          | Longwood, FL 32779                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                          | (sime)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| (b)                                      | Enter name of NEW Registered Agent and/or NEW Registered Office address:                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                          | 三百 宣 丁                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                          | 2001 Alsque Lakes Blud                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                          | NEW Projectored Office Address                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                          | NEW Registered Office Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                          | Long wood ,FL 32779                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| If the                                   | limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after                                                                                                                                                                                                                                                                                                                                                                        |
| the ch                                   | ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)                                                                                                                                                                                                                                                |
| was/w                                    | vere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.                                                                                                                                                                                                                                                                                      |
| the ar                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Sign                                     | ature of a member of authorized representative of a member  Teffvey A Ash tou  Printed or typed name of signee                                                                                                                                                                                                                                                                                                                                                                              |
| _                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| provision the object to me notification. | eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept bligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed refer to a change in the registered office address, I hereby confirm that the limited liability company has been address. |
| Signat                                   | ure of Degistered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |