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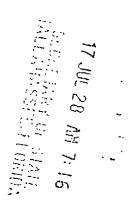
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COVER LETTER

TO:	Registration Section Division of Corporations			1			
SUBJE	JBC Utility LLC						
	Name	Name of Limited Liability Company					
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offic	ce Change and	d fee(s)	are submitted for filing.			
Please	return all correspondence concerning this	s matter to the	follow	្ត ing:			
Betty	Wuellenweber						
	Name of Person			1			
IBC I	Jtility LLC						
	Firm/Company						
	rimoCompany						
38 Bc	ow Center Rd.						
	Address						
Bow,	NH 03304						
•	City/State and Zip Code						
ар@ј	bcutility.com						
17	-mail address: (to be used for future annu	ıal report noti	fication)			
For fur	ther information concerning this matter,	please call:					
Betty	Wuellenweber	603	, 86	30-3218			
	Name of Person	_ \	Area	Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:	M	IAILIN	G ADDRESS:			
	Registration Section			on Section			
	Division of Corporations			of Corporations			
	Clifton Building		O. Box				
	2661 Executive Center Circle Tallahassee, Florida 32301	Т	allahass	ce, Florida 32314			
	Enclosed is a check for the following	amount:		•			
	☑ S25 Filing Fee	- \$	55 Filir	lg Fee & Certified Copy			
INHS18	R (2/14)		ı				

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.

. Na	me of the limited liability company: JBC Utility LLC	0	
	588 River Rd., Bow, NH 03304	(b)	38 Bow Center Rd. Bow, NH 03304
· (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (~)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		 -	
	April 18, 2017	ľ	M17000003301
	Date of filing/registration in Florida	4.	Document number
. (a)	James Wuellenweber		
. (-)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State:
	8787 Southside Blvd., Unit # 5210		≥.,
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	Contraction of the contraction o
	Jacksonville, FL	32256	28 2
(b)	James Wuellenweber		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:
	2846 Claire Ln		>
	NEW Registered Office Address:		
	Jacksonville	32223	<u>1</u>
ne cha gent w ras/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility con f the limi limited li	ered office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
<u> My</u>	alle Len wember	Bett	y A Wuellenweber
heret rovisio he obli o mere	ure of a member or authorized refresentative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change. Tames W we of Registered Agent	performa I for in C ereby co	nce of my duties, and I am familiar with and accept hapter 605. F.S. Or, if this document is being filed infirm that the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00