## m220000 15844

(Re	equestor's Name)	· ·
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	Mait	MAIL
(Bu	usiness Entity Name)	
(Dc	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer	
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Office Use Only



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## COVER LETTER

**TO:** Registration Section Division of Corporations

SUBJECT:	JGS PRAETOR, LLC		
	Name of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Regist	ered Office Change and fee(s) are submitted for filing.		
Please return all correspondence conce	erning this matter to the following:		
Name of Perso	on		
COGENCY GLOBA	AL INC		
Firm/Compan	11.44		
115 North Calhoun Stre	eet, Suite 4		
Address			
Tallahassee, FL 3	32301		
City/State and Zip	) Code		
dlittwin@dugganbert			
E-mail address: (to be used for fu	sture annual report notification)		
For further information concerning thi	s matter, please call:		
	at ( )		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDR Registration Section Division of Corporations	ESS: MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the fe	ollowing amount:		
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

## 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

I. Na	une of the limited liability company:	J	JGS PRAETOR, LLC			
2. (a)	1007 N. Federal Hwy Suite 5		1007 N. Federal Hwy	1007 N. Federal Hwy Suite 5		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	FORT LAUDERDALE, FL 33304		FORT LAUDERDALE,	FL 33304		
	10/13/2022		M22000015844			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	DUGGAN BERTSCH PLLC					
	Registered Agent and Registered Office shown on the records o	t'the Florida Dep	t, of State:			
	875 109TH AVENUE N.					
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	<del></del>	.F.		
	Suite 302		3S E			
	NAPLES . F	I34108	3	FILI SES SEB 14		
(b)	Cogency Global Inc.			AM 9:		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> 115 North Calhoun Street, Suite	_	:			
	NEW Registered Office Address:	<u> </u>				
	Tallahassee F	ı 3230	 1			
the cha agent v was/we the arti	imited liability company is not organized under the launge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the /S/ James M. Duggan	aws of the Stat of the registere liability compo of the limited e limited liabi	ed office and the business office any, it is hereby confirmed that liability company or as other lity company.  James M. Duggan  Printed or typed name of sections and the sections are sections.	ce of the registered at the change(s) wise provided in signee		
provisi the obl to mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing ions of my position as registered agent as providely reflect a change in the registered office address, thin writing of this change.	gree to act in t e performance led for in Chap I hereby confii	ms capacity. I further agree to of my duties, and I am familioner 605, F.S. Or, if this document that the limited liability contains that the limited liability contains the contains and the limited liability contains the limited liability contains and liabilit	o comply with the ar with and accept ment is being filed mpany has been		
Ciamer	/S/ Sean Chase					
Signatu	re of Registered Agent					