

Dec 27, 2021 10:56AM

GRAY ROBINSON

Dec 27, 2021 12:12 PM

P14000081179

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From: Carrie Ramos FRP, Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690

Account Name : GRAYROBINSON, P.A. - ORLANDO  
Account Number : I20010000078  
Phone : (407)843-8880  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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REGISTERED AGENT CHANGE  
JD-ASG MANAGEMENT COMPANY

Certificate of Status	0
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Page Count	02
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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: JD-ASG Management Company
2. The principal office address: 51 S. 3rd St. Jacksonville Beach, FL 32250
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3-30-1992 Document number: P14000081179
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jacques Guske51 S. 3rd StreetJacksonville Beach, FL 32250

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Adam Guske51 S. 3rd StreetP.O. Box NOT acceptableJacksonville Beach, FL 32250

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
 Signature of an officer or director

Jacques Guske - President  
 Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
 Signature of Registered Agent

12/22/2021  
 Date

If signing on behalf of an entity:

\_\_\_\_\_  
 Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
 CR2B045 (04/13)