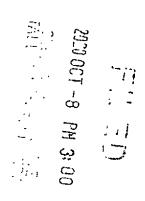
## P20000009400





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NOV 1 ; 2020

## **COVER LETTER**

TO: Registration Section Division of Corporations	
J&I. Construction Florida inc	
(Na	ame of Alien Business Organization)
Dear Sir or Madam:	
The enclosed Statement of Change of Refee(s) are submitted for filing.	egistered Agent/Registered Office for Alien Business Organization and
Please return all correspondence concer-	ning this matter to the following:
Larry Craig	
(Name of Person)	
J&L Construction Florida inc.	
(Firm/Company)	
11160 9th st e	
(Address)	
Treasure island FL,33706	
(City/State and Zip Coo	de)
For further information concerning this	matter, please call:
Larry Craig	727 3106013
(Name of Person)	(Area Code & Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	amount:
■ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

J&L Constructi	on Florida inc.				
01/27/2020		(Name of alien business organization) 3. p20000009400 4. 84-4599319			
(Florida r	egistration date) reasure island FL,	(Florida document	number)	(FEI Number, if app	licable)
-		(Principal office add	iress)		
	ress of registered	agent and office curren	tly on record wi	th this office:	
34-	10 w hollywood bly	d suite 415			
hol	lywood, FL 33021				
7. New registere	d agent and/or off	ice address:			
La	ry Craig				
11	60 9 th stb e				72
Tre	asure island FL, 33	3706			, [3
<del></del>	(Note: I	Registered office must be a l	Plorida street addre	ss)	)C
registered age  3. Such change	nt are identical.	red office and the street y the board of directors ctors.		••	
10	Larry (Sign	ature of chairman, vice chai	rman, or officer)		. 1
11. <u>La</u>	TY (Taig	e and capacity of person sig	ning in number 10	above)	
I hereby acc	ept the appointm	ent, if applicable: ent as registered agent. 05, Florida Statutes.	I am familiar	with and accept the	
Lange	Stered agent accepting	g appointment)	_4	10/4/2021 (Date	<del>-</del>
		EILING FEE.	235 00		

FILING FEE: \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 - Tallahassee, Fl. 32314