I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: WILBERT R WILLIAMS

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: J.A.W., QUOTA, L.L.C.

Current Principal Place of Business:

910 N. EXCELDA AVENUE TAMPA, FL 33609

Current Mailing Address:

910 N. EXCELDA AVENUE TAMPA, FL 33609

FEI Number: 90-1021671

Name and Address of Current Registered Agent:

WILLIAMS, WILBERT R. 910 N. EXCELDA AVENUE TAMPA, FL 33609 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	WILBERT R. WILLIAMS			02/19/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGRM	
Name	WILLIAMS, JUANITA	Name	WILLIAMS, WILBERT	
Address	910 N. EXCELDA AVENUE	Address	910 N. EXCELDA AVENUE	
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609	

02/19/2020

FILED Feb 19, 2020 Secretary of State 1660918929CC

Certificate of Status Desired: No

Date