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JLUNG ASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations							
•	icka Enternrices I P						
SUBJECT: Junaluska Enterprises, LP Name of Limited Partnership or Limited Liability Limited Partnership							
DOCUMENT NUMBER:							
The enclosed Statement of Change of Reg fee(s) are submitted for filing.	sistered Office and/or Registered Agent and						
Please return all correspondence concerning	ng this matter to:						
Christopher Klein							
Contact Person							
Klein Law Group, LLC							
Firm/Company							
15 Lake Street, Suite 2	10						
Address							
Savannah, GA 31411							
City, State and Zip Code							
companycompliance@kleinl	lawgroup.net						
E-mail address: (to be used for future annual							
For further information concerning this m	atter, please call:						
Alison Jones	at (912) _ 598-1771						
Name of Contact Person	Area Code and Daytime Telephone Number						
Enclosed is a \$35.00 check made payable	to the Florida Department of State.						
STREET ADDRESS:	MAILING ADDRESS:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
Clifton Building	P. O. Box 6327						
2661 Executive Center Circle	Tallahassee, FL 32314						
Tallahassee, FL 32301							

LAW OFFICES Klein Law Group, LLC

15 Lake Street, Suite 210 Savannah, GA 31411

Christopher E. Klein, Esq. chris@kleinlawgroup.net

Office (912) 598-1771 Fax (912) 598-1773

Robert J.B. Petmecky, Esq. rob@kleinlawgroup.net

Alison Jones alison@kleinlawgroup.net

July 8, 2014

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Statement of Change of Registered Agent for Junaluska Enterprises, LP

To Whom It May Concern,

Enclosed you will find a \$35.00 check made payable to the Florida Department of State along with the Limited Partnership Statement of Change of a Registered Agent . I have also enclosed a self-addressed, stamped envelope for your convenience to mail the documents back to my office.

If you have any questions or concerns regarding this matter, please do not hesitate to contact me.

Sincerely,

Alison Jones Legal Assistant

Enclosures: As Stated

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1		uska Enterp				
Nam	e of Limited Partne	rship or Limited L	iability Lin	mited Partnership)	
2. 04	/23/2007		3.	B070000	00134	
Date of filing/r	egistration in Floric	la		Florida documer	it number	
4. The name of the regi Department of State:	istered agent and the	e registered office	address as	shown on the re-	cords of the Florida	
_	CT	Corporation S	System			
	Name					
1200 South Pine Island Road						
_		Address				
	PI.	antation, FL 3	3324		AU T	
_		City, State and 2	Zip		Es = m	
5. The name and Floric	la street address of t	the new registered	agent and/	or office:	23	
	Ind	Corp Services	s, Inc.		SETTO	
		Name			PH 1:45	
17888 67th Court North						
Florida street address (P.O. Box not acceptable)					REFE 55	
	Loxal	natchee	FL	33470	>>	
-		City, State and 2				
6. Such change(s) is an Signature of General Pa	Rine W	ed by the Florida	Departmen	t of State.		
I hereby accept the app comply with the provisi and I am familiar with Gignature of Registered	ions of all statutes range an accept the obligation	elative to the prop utions of my positi	per and con ion as regis	nplete performan stered agent.		
Filing Fee: Certified Copy (or	\$35.0 52.5: stional):					