L08000028081

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

T. HAMPTON

JUN - 6 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Jefferson (Name	PH - 2, LLC e of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernir	ng this matter to the following:	
Samuel A. Persaud (Name of Person)	<u>L</u>	
Persaud + Nunez (Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
201 North Krome A	Ivenue	
Homestead, FL 33031 (City/State and Zip Code)	<u> </u>	
For further information concerning this ma	atter, please call:	
Samuel A. Persaud (Name of Person)	at (305) 273-4200 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follow	ving 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 608.416 or 608.508, 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.

•
fferson PH-1, LLC
ny: 232 Andalusia Ave. #202 Coral Gables, FL 33134
232 Andalusia Ave #202 Coral Gables, FL 33134
L08000028021
4. Document number
n the records of the Florida Dept_of State:
Samuel A. Personal
31 Olean Ruef Dogre 7 7 50 1te C-202 FL 33037 7 1
EW Registered Office address:
Nora Galego
Galego Law Group 232 Andalysia Ave. #202 Coral Gables ,FL 33134
e laws of the State of Florida, it is hereby confirmed eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.
EBS LAN GROUP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00