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**EXAMINER** 



## Law Office of TIMOTHY C. SCHULER

Timothy C. Schuler, Esq. Board Certified - Real Estate

Lynn A. Brauer, Esq.

December 9, 2009

Secretary of State
Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, Florida 32314

Re: PE of JoJos, LLC

Dear Sir/Madam:

Enclosed is an original Change of Registered Office and/or Agent for filing with your department, together with our check in the amount of \$25.00.

Please forward your acknowledgments of the change to the undersigned.

Sincerely yours,

Timothy C. Schuler

TCS/lh Enclosures

## 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.

1. Nan	ne of the limited liability company: PE OF JOJO	OS, LLC	•
2. (a)	Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	ny: 9000 Sheridan Street, #130 Pembroke Pines, FL 33024	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	9000 Sheridan Street, #130 Pembroke Pines, FL 33024	0 0
July 10	· · · · · · · · · · · · · · · · · · ·	L08000066677	
		4. Document number	
	Registered Agent and Registered Office shown on t Registered Agent: Registered Office Address:	Steven W. Deutsch  7805 S.W: 6th Court Plantation, FL 33324	And the second
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	W Registered Office address:	· · · · · · · · · · · · · · · · · · ·
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9075 Seminole Boulevard  Seminole ,FL 33772	-
that after office of hereby liability limited	imited liability company is not organized under the ler the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the canonimmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered office and the busin ase of a Florida limited liability company, it is	ess
(Signature	e of a member or authorized representative of a member)		
	nte E. Cruz or typed name of signee)	-	
I hereb	by accept the appointment as registered agent and a with the provisions of all statutes relative to the pro- iliar with and accept the obligations of my position r, if this document is being filed to merely reflect a c that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, a as registered agent as provided for in Chapter change in the registered office address, I hereb l in writing of this change.	and I r 608, vy

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

(Signature of Registered Agent)