Address Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time ☐ Certified Copy ☐ Walk in ☐ Will wait Photocopy ☐ Certificate of States ☐ Mail out **NEW FILINGS AMENDMENTS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit ☐ Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** ☐ Annual Report □ Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. JS & VS I	
	Name of the limited partnership
2. 5/23/2000	3. A0000000844
Date of filing/registra	ation in Florida Document number assigned
4. The name of the regist Department of State:	tered agent and the registered office address as shown on the records of the Florida
	EMO Corporate Services, Inc.
	Name 100 N.E. Third Avenue, Suite 1100
	Address
	Fort Lauderdale, FL 33301
•	City, State and Zip
5. The name and address	s of the new registered agent and/or office:
	Joseph E. Sirhal
	Name
<u> </u>	1824 South Ocean Drive Florida street address (P.O. Box not acceptable)
· · - <u></u>	Fort Lauderdales 33316 City, State and Zip
6. Such change(s) was/v	vere authorized by the general partners.
	Sirhal, Manager of JS & VS Management II, LLC, General Partner
Signature of General Partner	
I hereby accept the appoi with the provisions of al familiar with and accept	£Ω ≥ □

Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00