
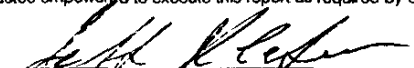


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JAN 10 AM 11:39

<div style="display: flex; justify-content: space-between;"><div>DOCUMENT # A06000000501 1. Entity Name JEFIS FAMILY LIMITED PARTNERSHIP</div><div style="text-align: center;"></div></div>				<div>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</div> <div style="font-size: 1.2em; font-weight: bold;">07 JAN 10 AM 11:39</div>	
Principal Place of Business 6039 COLLINS AVENUE APARTMENT 621 MIAMI BEACH, FL 33140		Mailing Address 6039 COLLINS AVENUE APARTMENT 621 MIAMI BEACH, FL 33140			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KLETER, JEFF 6039 COLLINS AVENUE APARTMENT 621 MIAMI BEACH, FL 33140			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L06000037749 JEFIS LLC 6039 COLLINS AVENUE, APT. 621 MIAMI BEACH, FL 33140		STREET ADDRESS CITY-ST-ZIP		
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<div style="font-size: 1.5em; font-weight: bold;">700085026127</div> <div style="font-size: 1.2em;">01/18/07--01042--017 **500.00</div>					
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE:  Jan. 8, 07 413-575-5244					