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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

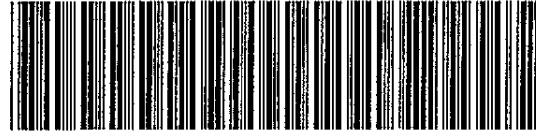
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FEB 1 2005  
FBI - NEW YORK

04 DEC 21 PM 1:25

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: JAXCON LLC  
(Name of corporation)

DOCUMENT NUMBER: L00000013414

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL W. SUTTON  
(Name of contact person)

JAXCON LLC  
(Firm/Company)

2919 FORBES STREET  
(Address)

JACKSONVILLE, FLORIDA 32205  
(City/state and zip code)

For further information concerning this matter, please call:

DANIEL W. SUTTON at (904) 626-2725  
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 9, 2004

DANIEL W. SUTTON  
JAXCON LLC  
2919 FORBES STREET  
JACKSONVILLE, FL 32205

SUBJECT: JAXCON LLC  
Ref. Number: L00000013414

We have received your document for JAXCON LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to change the Registered Agent information for this Limited Liability Company. The form submitted is for a Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 104A00068923

**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. The name of the limited liability company is: JAXCON LLC

2. The mailing address of the limited liability company is : 2919 FORBES ST.

JACKSONVILLE, FL 32236

10/27/2000  
3. Date of filing/registration in Florida

L00000013414  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

DANIEL W. SUTTON  
Name

1318 AVONDALE AVE.  
Address

JACKSONVILLE, FL 32205  
City, State and Zip

6. The name and address of the new registered agent and/or office:

\_\_\_\_\_  
Name

2919 FORBES ST.  
Florida street address (P.O. Box NOT acceptable)

JACKSONVILLE FL 32205  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Daniel W. Sutton  
(Signature of a member or authorized representative of a member)

DANIEL W. SUTTON  
(Printed or typed name of signer)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Daniel W. Sutton  
(Signature of Registered Agent)

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

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