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(Requestor's Name)					
MURRAY, SIMMONS & ZIEGLER, LLP					
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JINA JON OF CORPORATION

TAIL ANASSEE ELORIDA

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.

agent, e. com, m me come	0) 1 10. 15.41.	m 0		
1. The name of the limited				
.2. The mailing address of	the limited liability c	ompany is: _	215 N. Birch Roa	d #4-A, Ft. Lauderdale
Florida 33304				;
March 19, 2002			L02000006474	<u> </u>
3. Date of filing/registration	on in Florida		4. Document num	nber
5. The name of the register Florida Department of S		stered office	address as shown o	n the records of the
- 10-100 % op us	Matzel, Bruce			
	215 N. Birch Road	Name I #4-A		2 2
Address Ft. lauderdale, FL 33304				
	City	, State and Z	ip	芸のてデ
6. The name and address of	of the new registered a	agent and/or o	office:	See P
	Murray, David G.,	, Esq.		2003 MAY -5 PM 4: 03
	Name 1401 E. Broward Blvd. #200			
•	Florida street addre	ss (P.O. Box	NOT acceptable)	P 35
	Ft. Lauderdale	_{FL} 3330	1	
	City,	State and Zip	ı	
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement o	ange or changes are in the registered agent we by confirmed that the I liability company or	made, the Flo vill be identic le change(s) v r as otherwise	rida street address al. Or, in the case	Florida, it is hereby of the registered office of a Florida limited d by an affirmative vote of ticles of organization or
(Signature of a member or author)	zed repjetentatife pi a mem	ber)		-
Bruce Matzel	Malx			
(Printed or typed name of signee)			*	
I hereby accept the appoing comply with the provision and I am familiar with am Chapter 608, Fr., Gr., if address, I herefylcyniffin	ntment as registered is of all statutes relatification in accept the obligation is document is being that the limited liabil	agent and agi ve to the prop ons of my posi g filed to mere lity company	ree to act in this ca per and complete p tion as registered o ely reflect a change has been notified in	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.

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

FILING FEE: \$25.00

INHS18(10/99)

(Signature of Megistered Agent)