102001162

			1
M. Garcia		Phone 35380	2058
"JUG INVEST	ments L	(C)	
8803 SW 150	on City	•	
Mani	State	1 zp 331	<u> 90</u>
	(A		_
(City	y/State/Zip/Phon	e#)	
PICK-UP	☐ WAIT	☐ MAIL	
_	<u></u>	—	
			_
(Bus	siness Entity Na	me)	
			_
(Do	cument Number		
Certified Copies	Certificate	s of Status	
	٠		
Special Instructions to F	iling Officer:		1
·			
		:	
		1	
		1240	
		Jo J	
	Office Use On	is IMSI	`



900028540179

02/14/04--01002--016 **25.00

O4 FEB 13 AM IO: 11

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 limite	d liability company is: JMG IN	VESTMENTS LLC	·	·	
	the limited liability company is:		IR		
MIAMI, FL 33196	, ,				
				·	
5/14/02	······································	L02000011652			
3. Date of filing/registrati	on in Florida	4. Document number	er		
5. The name of the registe Florida Department of S		e address as shown on	the records	of the	
	JORGE A. GARCIA, SR.				
	Name 8803 SW 150 PL CIR				
Address MIAMI, FL 33196					
	City, State and 2	Zip	AE 0		
				- 	
	MARILYN GARCIA		B 13		
8803 SW 150 PL CIR			AM ID: 11		
	Florida street address (P.O. Box	x NOT acceptable)			
	MIAMI, _{FL} 331	96			
	City, State and Zi	ip			
confirmed that after the chand the business office of liability company, it is her the members of the limited	pany is not organized under the lange or changes are made, the Fl the registered agent will be identice by confirmed that the change(s) deliability company or as otherwise the limited liability company.	aws of the State of Flor lorida street address of ical. Or, in the case of was/were authorized b se provided in the artic	rida, it is he the registere a Florida lii y an affirma les of organ	reby ed office nited ative vote of ization or	
Jarela Varie		_		,	
(Signature of a member or authori	zed representative of a member)				
MARIELA GARCIA		_			
(Printed or typed name of signee)					
Musso 4	ntment as registered agent and as s of all statutes relative to the pro d accept the obligations of my pos his document is being filed to men that the limited liability company	gree to act in this capa oper and complete perf sition as registered age rely reflect a change in y has been notified in w	city. I furth ormance of ent as provide the registe writing of the	er agree to my duties, led for in red office s change.	
(Signature of Registered Agent)	m of Councidations D.O. Des. (2)	27 Tolloho 171 2	2214		
/ // Divicio	n of Cornorations PO Roy 63'	27 Tallahassee FL 3	2314		

FILING FEE: \$25.00

INH\$18(10/99)