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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	i
SUBJECT: J. P. Properties of Sanasota U.C. (Name of Limited Liability Company)	
doc# L02000014885	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jeffrey Hess or Donna Hess (Name of Person)	
JP Properties of Sarasota LLC (Firm/Company)	
4911 Brywill Circle	FILED 2004 DEC 13 PM 12: 27 SECRETARY OF STATE TALLAHASSEE, FLORID
Sanasota Fl 34234 (City/State and Zip Code)	ED RICE
For further information concerning this matter, please call:	27 ATE DRIDA
Donna Hess at 941 371-8555 (Name of Person) (Area Code & Daytime Telephone Number	er)
Enclosed is a check for the following amount:	
\$25,00 Filing Fee & S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy (ad	tatus &

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 November 11, 2004

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

Subject: CHANGE OF ADDRESS FOR LLC

Dear Sir or Madame:

Please find the appropriate form enclosed to change our address for JP Properties of Sarasota LLC. If you have any questions, please feel free to call me from 8-4:30, Mon-Fri at 941-371-8555.

Donna Hess

Thank you,

FILEU 2004 DEC 13 PM 12: 27 SECRETARSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 23, 2004

JEFFREY HESS OR DONNA HESS JP PROPERTIES OF SARASOTA, LLC 4911 BRYWILL CIRCLE SARASOTA, FL 34234

SUBJECT: JP PROPERTIES OF SARASOTA, LLC

Ref. Number: L02000014885

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

Because your cover letter refers to an address change, we are enclosing the two forms which you may need to change addresses. If you need both of these forms, they can be filed together for the single \$25 fee.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 704A00066387

ON DEC 13 PH 12: 2 ECRETARY DE STAT



FLORIDA DEPARTMENT OF STATE Please correct links
Hall Brywill links
Thanks! Glenda E. Hood Secretary of State

December 6, 2004

JEFFREY HESS OR DONNA HESS JP PROPERTIES OF SARASOTA, LLC 4811 BRYWILL CIRCLE SARASOTA, FL 34234

SUBJECT: JP PROPERTIES OF SARASOTA, LLC

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Ref. Number: L02000014885

We have received your document for JP PROPERTIES OF SARASOTA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mailing address has been updated, as shown on the attached printout, but your registered agent form is being returned for the following reasons. Only one registered agent can be named, and that agent must sign the bottom of the form accepting the designation as agent.

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) 245-6958.

Lee Rivers Document Specialist

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Letter Number: 204A00068182

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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: 2. The mailing address of the limited liability company is: 3. Date of filing/registration in Florida 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: 6. The name and address of the new registered agent and/or office: Florida street address (P.O. Box NOT acceptable) 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. ture of a member or authorized representative of a member) 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 can firm that the limited liability company has been notified in writing of this change. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)