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(Re	equestor's Name)			
(Ad	ldress)			
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(Bu	ısiness Entity Nar	me)		
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B. BOSTICK
MAY **26** 2012
EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT:	J & H Sie	egel Family I	_LC	
1	Name of Limited	l Liability Com	pany	
Dear Sir or Madam:				
The enclosed Registered Agent/Re	gistered Office (Change and fee	(s) are submitted f	or filing.
Please return all correspondence co	oncerning this m	atter to the follo	owing:	
Joel Siege	el .			
Name of Person				
J & H Siegel Fan Firm/Company	nily LLC			
6500 nw 12 ave s	uite 101			12 HAY 25
Ft. Lauderdale, Flor				1
Jknowlunch@aol.com E-mail address: (to be used for future annual report notification)		on)		M 2: 28
For further information concerning				
Joel Siegel	at (/	560.1791	
Name of Person		Area Code	& Daytime Telephone	Number
STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the	e following amo	ount:		
✓ \$25 Filing Fee		\$55 Filing Fee & Certified Copy		

TO: Registration Section

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.

J & H Siegel Family LLC			
6500 NW 12 Ave. Suite 101			
Ft. Lauderdale, Florida 33309			
6500 NW 12 Ave. Suite 101			
Ft. Lauderdale, Florida 33309			
LO-2000020745			
4. Document number			
the records of the Florida Dept. of State:			
Joel Siegel			
6880 Powerline Rd Ft. Lauderdale, Florida 33309			
W Registered Office address: 22 6500 NW 12 Ave 22 Suite 101			
It. Lauderdale > ,FL33309 Ilaws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization y. Ingree to act in this capacity. I further agree to oper and complete performance of my duties, so it is a registered agent as provided for in early reflect a change in the registered office by has been notified in writing of this change.			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00