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## LAW OFFICES WILLIAM D. SOMAN, P.A.

3471 Main Highway, #622 Coconut Grove, Florida 33133

REPLY TO: POST OFFICE BOX 330637 COCONUT GROVE, FLORIDA 33233 TELEPHONE 305-476-1485 FACSIMILE 305-476-1486

August 9, 2005

Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Statement of Change

Dear Sir or Madam:

You will find enclosed one (1) Statement of Change of Registered Office or Registered Agent for a Limited Liability Company and five (5) Statements for Corporations. Checks for the filing fee are attached to each Statement.

Let me know if you need any further information.

Sincerely,

William D. Soman

WDS/hn

## 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: J3, LLC c/o Jean P. Soman, 2. The mailing address of the limited hability company is : P.O. Box 330637, Miami, FL 33233 L02000031424 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: William D. Soman, P.A. Name 9000 Arvida Drive Address Coral Gables, FL 33156 City, State and Zip 6. The name and address of the new registered agent and/or office: William D. Soman, P.A. Name 3471 Main Highway, #622 Florida street address (P.O. Box NOT acceptable) Miami City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby contirmed 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. Lun John John John Marke of a member) Jean P. Soman, Member/Manager (Penned or typed name of signee) 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 standes relative to the proper and complete performance of my didics, 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. Summer of Registered Spring (A. by Murs) Some Pro WILLIAM D. SOMAN, PRES

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

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FILING FEE: \$25.00