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ROGERS & HARDIN

ATTORNEYS AT LAW A LIMITED LIABILITY PARTNERSHIP

WRITER'S DIRECT DIAL NUMBER: 404-954-7528 E-MAIL: KDY@RH-LAW.COM 2700 INTERNATIONAL TOWER, PEACHTREE CENTER 229 PEACHTREE STREET, N.E. ATLANTA, GEORGIA 30303-1601 (404) 522-4700 FACSIMILE: (404) 525-2224

May 30, 2003

Via FedEx

Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: SJ&P Properties, LLC

Ladies/Gentlemen:

Enclosed are forms to change the principal mailing address and the registered agent address of the above corporation. I was advised that the fee for filing these documents would be \$25.00 for the two documents. I have enclosed a check in that amount. If that information is incorrect, please e-mail or phone me and I will send you the additional check. Please return evidence of this filing to my attention.

Please call me if you have any questions regarding this filing.

Very truly yours,

Haching J. D

Kathryn J. Dady Senior Paralegal

/kd cc: William T. Watts, Jr., Esq.

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: _____SJ&P Properties, LLC

2. The mailing address of the limited liability company is : 5220 Belfort Road, Jacksonville

Florida 32256-6012

April 17, 2003

L03000013793

3. Date of filing/registration in Florida

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:

	RUDEILIVI. DAKEI	S.,	
	Name 6650 Southpoint Parkway, Suite 200		
	Address Jacksonville, FL 32216		
	City, State and Zip		
6. The name and address	of the new registered agent and/or office:		
	Robert M. Baker	D DRIDA	
	5220 Belfort Road Suite 400	· · · · · · · · · · · · · · · · · · ·	
	Florida street address (P.O. Box NOT acceptable)	· · · •	
	Jacksonville FL 32256-6012		
	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.

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(Signature of a member or authorized representative of a member)

Robert M. Baker, Authorized Representative

(Printed or typed name of signee)

I hereby accept the appointment as registered	agent and agree to act in this capacity. I further agree to
	ve to the proper and complete performance of my duties,
and I am familiar with and accept the obligatio	ns 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 ity company has been notified in writing of this change.
address, I hereby confirm that the limited liabil	ity company has been notified in writing of this change.
Relimit M 3 h	······································
Land - Contraction	

(Signature of Registered Agent)

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

FILING FEE: \$25.00