## 104000050714

(Re	equestor's Name)	
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2000 JUN -3 PM 1: 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN - 3 2008

**EXAMINER** 

## **COVER LETTER**

	□ \$55 Filing Fee & Certified Copy	
Enclosed is a check for the follow	ving amount:	
STREET/COURIER ADDRESS: 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	
(Name of Person)	(Area Code & Daytime Telephone Nun	nber)
Daniel R. Jensen	at ( 321 ) 287-0052	Dm To
(City/State and Zip Code)  For further information concerning this ma	atter, please call:	RY OF STATE
Orlando, FL 32835		2008 JUN -3 SECRETARY ALLAHASSI
(Address)	·	200 TAL
1119 Spring Lite Way		
(i iiio company)		
Dan Jensen, LLC (Firm/Company)		
Daniel R. Jensen (Name of Person)	• • • • • • • • • • • • • • • • • • •	
Please return all correspondence concerning	ng this matter to the following:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing	ng.
Dear Sir or Madam:		
SUBJECT: Dan Jensen, LLC (Name	e of Limited Liability Company)	
TO: Registration Section Division of Corporations		
TO: Registration Section		434

## 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. Na	me of the limited liability company: Dan Jenser	n, LLC		#
2. (a)	Principal office address of limited liability company: 1119 Spring Lite Way  (Note: MUST BE STREET ADDRESS)  Orlando, FL 32835			0 0
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1119 Spring Lite Way Orlando, FL 32835		<b>±</b>
7/7/20	004	L04000050716		
3. Da	te of filing/registration in Florida	4. Document number		
5. (a	) Registered Agent and Registered Office shown on	the records of the Florida De	pt. of State:	
	Registered Agent:	B&C Corporate Services of Ce	entral Florida	
Registered Office Address:		390 North Orange Avenue Suite 1100		
		Orlando, FL 32801		
<b>(b</b> )	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addres	<u>s</u> :	
	NEW Registered Agent:	Daniel R. Jensen		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1119 Spring Lite Way	Z008 SEC	
		Orlando	32835	1. 1. 1.
that a office hereb liabili limite	limited liability company is not organized under the fter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cy confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of d liability company.	et address of the registered of ase of a Florida limited liabil by an affirmative vote of the r	fice and the busine ity company, it is nembers of the lim	ss ited
(Signat	ure of a member of authorized representative of a member)			
D	aniel R. Jensen	_		
	d or typed name of signee)			
I her complete for far far far far far far far far far fa	eby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the pr miliar with and accept the obligations of my position Or, if this document is being filed to merely reflect a rm that the limited liability company has been notified	ngree to act in this capacity. In oper and complete performand as registered agent as provide change in the registered officed in writing of this change.	I further agree to ice of my duties, an led for in Chapter e address, I hereby	nd I 608,
Yellow	ure of Penistered Worth			

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