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SECRETARY OF STATE

### CARLA TURNER-HAHN, P.A.

#### ATTORNEY & COUNSELOR AT LAW

#### August 4, 2005 VIA REGULAR U.S. MAIL

DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314

RE: JWTJR, LLC STATEMENT OF CHANGE OF REGISTERED AGENT FOR LLC; Federal Tax ID# 20-1530607, DOCUMENT # I04000062069

Dear Division of Corporations:

Please find enclosed the completed STATEMENT OF CHANGE OF REGISTERED AGENT FOR LLC and \$25.00 filing fee for the above captioned LLC.

Please contact me immediately at the numbers/email address below should you have any questions or require any further information regarding this filing I am making on behalf of my client. Thank you for your consideration.

Very truly yours,

SECRETARY OF STALLAHASSEE, FLURIUS

Carla Turner-Hahn, Esquire

## 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: The mailing address of the limited liability company is: 2191 5W RIVERSIDE DR PALM CITY FL 34990

1. The name of the registered agent and the registered office address as shown on the records of the registered of the re

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CORPORATE CREATIONS NETWORK INC Name 11380 PROSPERITY FARMS RD # 221E Address PALM BEACH GARDENS FL 33410 City, State and Zip

6. The name and address of the new registered agent and/or office:

CARLA TURNER-HAHN ESQ

Name
1517 JUNGLE AVE N

Florida street address (P.O. Box NOT acceptable)

TRETERSBURG FL 33716

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 Figure 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.

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

(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 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 confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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

**FILING FEE: \$25.00**