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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(Document Number)	05/12/0G01029004 **25.
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Special Instructions to Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

ZOOD JUN 12 P 3: 06
TALLAMASSEE, FLORIDA

May 22, 2006

JAIME A. URANGA 10455 NW 41ST STREET MIAMI, FL 33178

SUBJECT: JL INVESTMENT GROUP, LLC

Ref. Number: L04000091234

We have received your document for JL INVESTMENT GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 306A00035817

Agnes Lunt Document Specialist



COVER LETTER

TO: Registration Section Division of Corporations	FILED	
SUBJECT: TL TNUESTMENT (Name of Limite	d Liability Company) LLAHASSEE, FLORIDA	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
,		
JAIME A Uranga		
(Name of Person)		
J.L. Investment Grap. (Firm/Company)	LLC	
10455 NW 41 5 free	/	
Mismi F/ 3317 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Jaine A. Uranea at (Name of Person)	(Area Code & Daytime Telephone Number)	
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	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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: I.L. Investment, Group LLC.
2. The mailing address of the limited liability company is: $\frac{10455}{5176000000000000000000000000000000000000$
12/16/2004 L 04 0000 91234
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: Name Name Name Address Address Address City, State and Zip
6. The name and address of the new registered agent and/or office:
TAIME A. Uranga TIOO NW 12 Street, Suite 1210 Florida street address (P.O. Box NOT acceptable) MIAMN FL 33/26
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 of fice of the registered agent will be identical. Or, in the case of a Florida limited liability comp ny, 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 familian 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.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00