## 104000094046

(Requestor's Name)					
(A	ddress)				
<u> </u>	address)				
(C	City/State/Zip/Phone #)	<del>,</del>			
PICK-UP	☐ WAIT	MAIL			
(E	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			
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Special instructions t	o Filing Officer:				

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08 FEB 22 PM 2:07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

B. KOHR

**EXAMINER** 

FEB 2 2 2008



ACCOUNT NO. : 072100000032
REFERENCE : 455683 7115281
AUTHORIZATION :
COST LIMIT: \$ 25:00 Spell ble good
ORDER DATE: February 22, 2008  ORDER TIME: 9:52 AM
ORDER NO. : 455683-005
CUSTOMER NO: 7115281
CHANGE OF AGENT
NAME: RUBLOFF JETSTAR 731, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY
CONTACT PERSON: Jeanine Reynolds EXT# 2933

**EXAMINER:** 

## 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.

-80.11, 0. 00111, 111 1110 111111	0, 2 00 2000				
1. The name of the limited	d liability company i	is: RUBLOFF JET	STAR 731, LLC	······································	
2. The mailing address of	the limited liability	company is :			
4949 Harrison Avenue, Suite 2	200, Rockford, IL 61108	3			
	<u> '</u>			<del></del>	
12/29/2004		L	L04000094046		
3. Date of filing/registration in Florida 4. Do		. Document number			
5. The name of the register Florida Department of S	red agent and the reg State:	gistered office ad-	dress as shown on the records of	the	
	Cor	porate Access, Inc.			
		Name		0.	
236 E. 6th Avenue				5 5 5	
Address					
Tallahassee, FL 32303					
	Cit	y, State and Zip	<u></u>		
6. The name and address of	of the new registered	agent and/or offi	ice:	PH 2: 07	
	Corpora	tion Service Compar	ny	F.5. 0	
,		Name		别二	
_	12	01 Hays Street		Đ.L.	
·	Florida street addre	ess (P.O. Box <b>N</b> O	T acceptable)	,	
	Tallahassee	FL	32301		
	City,	, State and Zip			
confirmed that after the ch and the business office of liability company, it is her	lange or changes are the registered agent by confirmed that the lited liability compar	made, the Florid will be identical. he change(s) was	of the State of Florida, it is here a street address of the registered Or, in the case of a Florida limi s/were authorized by an affirmati e provided in the articles of orga	office ited ive vote	
(Signature of a member or authoris	zed representative of a mer	nher)			
.4		,			
(Printed or typed name of signee)	1, President à	4 the Wana	ger		
1/	ntment as registered s of all statutes relation accept the obligation is being that the limited liabi		to act in this capacity. I further and complete performance of m n as registered agent as provide reflect a change in the registered been notified in writing of this d	agree to y duties, d for in d office change.	
		•	Γallahassee, FL 32314	•	

**FILING FEE: \$25.00** 

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