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EXAMINER
MAR 1 2011

COVER LETTER

Division of Corporations		
suвjест: Jense	n and Group Engineering Consultants, LLC	
Sobole 1.	Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent	Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondenc	e concerning this matter to the following:	
Haley R.	Manie	
Name of Pe		
Forizs & D0		
4301 Anchor Plaza P	arkway, Suite 300	
Tampa, Flori		
City/State and Z	ip Code	
hmaple@forizs E-mail address: (to be used for futur	r-dogali.com re annual report notification)	
For further information concern	ing this matter, please call:	
Haley Maple	at (813) 289-0700	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 3230	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	

TO: Registration Section

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. liability company submits the following statement in ordagent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited der to change its registered office or registered
1. Name of the limited liability company: Jensen an	d Group Engineering Consultants, Llដ្ឋ
2. (a) Principal office address of limited liability compar	ny: 1626 Barber Road
(Note: MUST BE STREET ADDRESS)	Suite A Sarasota, Florida 34240 US
(b) Mailing address of limited liability company:	1626 Barber Road
(Note: MAY BE POST OFFICE BOX)	Suite A Sarasota, Florida 34240 US
02/11/2005	L05000015674
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	
Registered Agent:	W.R. Klein, P.A.
Registered Office Address:	1990 Main Street Suite 750 Sarasota, Florida 34237 US
NEW Registered Agent: NEW Registered Office Address:	Forizs & Dogali, P.A. 4301 Anchor Plaza Parkway
(MÜST BE FLORIDA STREET ADDRESS)	Suite 300 Tampa ,FL 33634
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change (of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	Florida street address of the registered office atical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company. Signature of Registered Agent	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.
Division of Corporations, P.O. Box 6	327, Tallahassee, FL 32314

FILING FEE: \$25.00