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LAW OFFICES Case & Muffler A LIMITED LIABILITY PARTNERSHIP

SUITE 102 2810 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FLORIDA 33306

JAMES L. CASE* STEPHEN C. MUFFLER, LL.M. *ALSO MEMBER MICHIGAN BAR

(954) 563-1000 FAX (954) 565-2047 WEB SITE: www.floridaclosings.com

March 21, 2005

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Re:

ROBJO, LLC - Statement of Change of Registered Office or Registered Agent or

Both for Limited Liability Company

Dear Sir/Madame:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, together with a check in the amount of \$35.00, which represents payment of your fee for same.

Sincerely,

JAMES L. CASE, P.A.

Katie Osborne Legal Assistant

/klo encs. G:\KATIE\Corp\Sec of State - Statemt of Chnge.ltr

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 limite	d liability company is:	ROBJO,	LLC		
2. The mailing address of				Court Road,	
Summerfield, FL 3449					- -
March 1, 2005			L05000020858	3	
3. Date of filing/registrati	on in Florida		4. Document nur	nber	
5. The name of the registe Florida Department of S	State: Florida is Filings, Inc	Name	address as shown o	on the records of the	
	A Fort Lauderdale, FL	ddress	ip		
6. The name and address of	of the new registered age	nt and/or o	office:		
	Robert Slutsky				
	12827 S.E. 90th Cou	ame rt Road			
-	Florida street address (P.O. Box	NOT acceptable)		
	Summerfield	FL 3449	1		
	City, Sta	te and Zip			
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement of (Signature of a member or authority)	ange or changes are mad the registered agent will eby confirmed that the c I liability company or as f the limited liability cor	ie, the Flo be identic hange(s) v otherwise	rida street address al. Or, in the case	of the registered office of a Florida limited	of
Robert Slutsky				<u> </u>	
(Printed or typed name of signee)				20	4
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, R.S. Or, if the address of hereby confirm	ntment as registered age is of all statutes relative to accept the obligations this document is being fil that the limited liability	nt and agr o the prop of my posi ed to mere company l	ree to act in this ca er and complete pe tion as registered o ly reflect a change has been notified in	pacity. I further agree to strong the series of my duties agent as provided for in in the registered office a writing of this change.	to ',
(Signature of Registered Agent)	1	_			

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

INHS18(10/99)

FILING FEE: \$25.00