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## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Mo	M&L Enterprises, LLC		
Name of	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
Mike Goodwin			
Name of Person			
	ALI SE		
Breezego Firm/Company	AR J		
Final Company	ASS IA		
2222 Carataina tilind	SER SER		
3332 Southside Blvd			
Address	LOSTA SP		
	RA W		
Jacksonville, FL 32216	<b>&gt;</b>		
City/State and Zip Code	!		
Mike@hreezego.com			
Mike@breezego.com E-mail addross: (to be used for future annual report	notification)		
For further information concerning this mat	ter, please call:		
Jan Lappan	at ( 904 ) 998-4066 ext. 231		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	, • • • • • • • • • • • • • • • • • • •		
Division of Corporations	of Corporations Division of Corporations		
Cliftor Building	ding P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassce, Florida 32314		
Pananassee, Pionda 52501			
Enclosed is a check for the followi	ng amount:		
\$25 Filing Fee	\$55 Filing Fcc & Certified Copy		
INHS18 (5/08)			

INHS18 (05/08)

## 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. Name of th	e limited liability company:	M&L Enterprises, LLC	
2. (a) Princip	 bal office address of limited liability company	: 8003 James Island Trail	
(Note	: MUST BE STREET ADDRESS	Jacksonville_FI_32256	
(b) Mailin	g address of limited liability company:	8003 James Island Trail	
( <u>Note</u>	MAY BE POST OFFICE BOX)	Jacksonville, FL 32256	
	6/29/2011	L05000021632	
3. Date of fili	ng/registration in Florida	4. Document number	
5. (a) Regist	ered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Regist	ered Agent:	Jan Lappan	
Regist	ered Office Address:	4545 Arrow Wind Lane	
		Jacksonville, FL 32258	
(b) Enter r	name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address."	
<u>NEW</u>	Registered Agent:	Michael Goodwin	
<u>NEW</u> (MUS)	Registered Office Address: TBE FLORIDA STREET ADDRESS)	3332 Southside Blvd.	
		Jacksonville ,FL32216	
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 Florida limited 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 men	ber or authorized representative of a member		
	Salem Hassan		
Printed or typed na	<u> </u>		
I hereby acce comply with the and I am famil Chapter 608, I address, I here	of the appointment as registered agent and age te provisions of all statules relative to the pro- lidr with and accept the obligations of my pos F.S. Or, if this document is being filed to mer by confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, it on as registered agent as provided for in cly reflect a change in the registered office has been notified in writing of this change.	
Signature of Regis	defect Agent		
	Division of Corporations, P.O. Box 632	,	