

L05000033982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

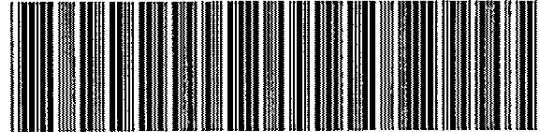
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LYNCH, COX, GILMAN & MAHAN P.S.C.

**500 WEST JEFFERSON STREET, SUITE 2100
LOUISVILLE, KENTUCKY 40202-2812
(502) 589-4215
Fax (502) 589-4994
E-mail: bmarshall@lcgandm.com**

ROBERT A. MARSHALL

**INDIANA OFFICE:
521 E. 7TH STREET
JEFFERSONVILLE, INDIANA 47130
TELEPHONE
(812) 283-7838**

August 8, 2005

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

RE: Statement of Change of Registered Office or Registered
Agent or Both for Limited Liability Company for JPMS
Properties, LLC

Dear Sir or Madam:

Enclosed please find two copies of the above-mentioned
document and our firm's check in the amount of \$25.00 for filing
fees.

Please place this document of record and return it to us in
the enclosed, self-addressed envelope.

Your help in this matter is greatly appreciated.

Very truly yours,

Robert A. Marshall

Robert A. Marshall

RAM/ac
Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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.

FILING FEE: \$25.00

RECEIVED
JUN 12 P 4: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA