

L0500012628

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000137023 3)))



H080001370233ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CHARLES BACLET AND ASSOCIATES INC
Account Number : I20080000054
Phone : (949) 955-9585
Fax Number : (800) 652-6504

L. SELLERS

MAY 28 2008

EXAMINER

REGISTERED AGENT CHANGE

JSP LINCOLN TORREY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

2008 MAY 23 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAY 27 AM 10:39

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JSP Lincoln Torrey, LLC
(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 correspondence concerning this matter to the following:

Nicole Parnell
(Name of Person)

Charles Baciak and Associates, Inc.
(Firm/Company)

2030 Main Street, Suite 1030
(Address)

Irvine, CA 92614
(City/State and Zip Code)

For further information concerning this matter, please call:

Nicole Parnell at (949) 955-9585
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

FILED
2008 MAY 27 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 the limited liability company: JSP Lincoln Torrey, LLC

2. (a) ☒ Principal office address of limited liability company: 500 Washington Street

(Note: **MUST BE STREET ADDRESS**)

Suite 700

San Francisco, CA 94111

(b) ☐ Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**)

07/22/2005

L05000072628

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

CT Corporation System

Registered Office Address:

1200 South Pine Island Road

Plantation, FL 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

NRAI Services, Inc.

NEW Registered Office Address:

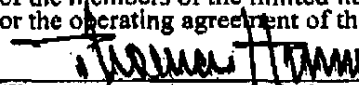
2731 Executive Park Drive

(MUST BE FLORIDA STREET ADDRESS)

Suite 4

Weston, FL 33331

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 member or authorized representative of a member)

Thomas Coates, Managing Member

(Printed or typed name of signer)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent)

Jose Castellanos, Asst. Secretary

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

FILING FEE: \$25.00