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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J.E.B., LLC (Name of Limited	Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this man	tter to the following:
Carla Turner-Hahn, Esq. (Name of Person)	
The Hayes Law Group, P.A. (Firm/Company)	
4701 Central Ave, Ste A	•
(Address)	
St. Petersburg, Florida 33713	
(City/State and Zip Code)	
For further information concerning this matter, pleas	e call:
Carla Turner-Hahn at (72	7) 381-9026
(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 amou	nt:
\$25 Filing Fee [\$55 Filing Fee & Certified Copy

INHS18 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 of liability company submits the following statement agent, or both, in the State of Florida.	or 608,508, Florida Statutes, the tin order to change its registered	undersigned limited l office or registered		
1. The name of the limited liability company is:	J.E.B., LLC	 ,		
2. The mailing address of the limited liability company is: 7957 Idlewild Lane; Largo, FL 33777				
		, Sixti .		
08/25/2005	L0500084679			
3. Date of filing/registration in Florida	4. Document number			
5. The name of the registered agent and the registe Florida Department of State:	red office address as shown on the	records of the		
Carla Turner-Hahn, E	Esq			
<u> </u>	Name	1.3		
1517 Jungle Ave. North				
Address				
St. Petersburg, FL 337	10 late and Zip			
•	•	SS 65 F		
6. The name and address of the new registered age	nt and/or office:	F Z M		
Turner-Hahn, Carla Es	eq			
Name 4701 Central Avenue, Suite A				
Florida street address (P.O. Box NOT acceptable)	•		
St. Petersburg,	FL 33713			
City, Sta	te and Zip	and the second s		
If the limited liability company is not organized un confirmed that after the change or changes are made and the business office of the registered agent will liability company, it is hereby confirmed that the confirmed tha	de, the Florida street address of the be identical. Or, in the case of a F hange(s) was/were authorized by a r as otherwise provided in the articompany.	registered office Florida limited an affirmative vote		
Rebecca H. Bradley (Printed or typed name of signee)	· · · · · · · · · · · · · · · · · · ·			
I hereby accept the appointment as registered age comply with the provisions of all statutes relative t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability	nt and agree to act in this capacity o the proper and complete perform of my position as registered agent ed to merely reflect a change in the company has been notified in writh	y. I further agree to vance of my duties, as provided for in e registered office ing of this change.		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)

(Signature of Registered Agent)