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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations

_{subject:} Jade Holdings Group 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:

Mark C. Perry, Esquire

Name of Person

Law Offices of Mark C. Perry, P.A.

Firm/Company

2400 E. Commercial Blvd., Suite 511

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

markperryesq@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark C. Perry

_{at} 954

351-2601

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

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: Jade Holdings Group Lt	.c			
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 4300 North University Drive, Suite E200 Fort Lauderdale, FL 33351			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
09/26/2005	L05000094270		<u></u>	
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida I	Dept. of S	State:	
Registered Agent:	Adam J. Katz, Esquire	-	201	
Registered Office Address:	5571 University Drive, Suite 204	<u> </u>	<u>∓</u>	Ü
	Corel Springs, FL 33067	$\frac{g_{(3)}}{g_{(3)}}$	8	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	Y Registered Office addr		A	1 1
NEW Registered Agent:	Mark C. Perry, Esquire	골 문	-	~
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2400 East Commercial Boulevard, Suite	e 511		
MOST DE LECHIDA BUILDE ADDRESS)	Fort Lauderdale ,FL 33308			
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a Fl was/were authorized by a	registere orida lin	d offic rited	e ote of or
Signature of a member or authorized representative of a member	•			
Printed or typed name of signee				
I hereby accept the appointment as registered agent and agently with the provisions of all statutes relative to the province I am families with and accept the obligations of my post chapter 608, ISS. Or, if this document is being filed to merical easiety of a company and the limited liability company.		•	r agre vy dul ed for ed offi chang	e to ies, in ce ce
Division of Cornerations, P.O. Box 632	7. Tallahassee, EL 32314	1		

FILING FEE: \$25.00

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