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SECRETARY OF STATE AS JUVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	,	
SUBJECT: JRO HOMES, 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	g this matter to the following:	
·		
Cobriel W. Falbo Fea		
Gabriel W. Falbo, Esq. (Name of Person)	<u> </u>	
,		
Gabriel W. Falbo, Esq.	·	3
(Firm/Company)		OF JUN -8
		見いい
14609 Village Glen Circle		-8 56 56 56 56 56 56 56 56 56 56 56 56 56
(Address)		N-8 PH 1:47
		PH 1:47
Tampa, Florida 33618-2733		
(City/State and Zip Code)		- 0
For further information concerning this mat	tter. please call:	
	, F	
Gabriel W. Falbo, Esq.	at (813) 334-7398	
(Name of Person)	(Area Code & Daytime Telephone 1	Number)
	•	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations P.O. Box 6327	
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the followi	ing amount:	
\$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 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. The name of the l	imited liability compa	any is: JRO HOMES, LLC	·
2. The mailing address	ess of the limited liab	lity company is : 7211 North Dale	Mabry, Suite 203, Tampa, Florida 33614
November 2 4, 2005	,	L050001075	89
3. Date of filing/reg	istration in Florida	4. Documen	nt number
5. The name of the re Florida Departmen	nt of State:	e registered office address as she	own on the records of the
	KEITH JACKS		
	7075 Diffic Lon	Name	
•	7975 Riffle Lan	Address	
/	Orlando, Florida 32818		_
	- Charles - Charles	City, State and Zip	
6. The name and address of the new registered agent and/or office:		SECRET SECRET	
	PAUL JACKSON		& SET
	14047 Briardale	Name 14047 Briardale Lane	
	Florida street a	address (P.O. Box NOT accepta	ble)
	Tampa	FL 33618	<u> </u>
	•	City, State and Zip	
confirmed that after and the business offiliability company, it of the members of to or the operating agree (Signature of a member or	the change or changes ce of the registered as is hereby confirmed the he limited liability con- cement of the limited authorized representative of sq., Attorney for the C		dress of the registered office case of a Florida limited
` • •	appointment as regist visions of all statutes i th and accept the obli it is this document is nfirm that the limited	ered agent and agree to act in the relative to the proper and compligations of my position as regist being filed to merely reflect a cliability company has been noti	his capacity. I further agree to lete performance of my duties, ered agent as provided for in hange in the registered office fied in writing of this change.

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

FILING FEE: \$25.00

INHS18 (8/05)