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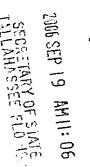
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JME AG Enterprises, LLC (Name of L	Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Bruce R. Abernethy, Jr. (Name of Person)	SECRETARY OF SALLAMESSEE, FISAN	
Bruce R. Abernethy, Jr., P.A. (Firm/Company)	ANII: 06	
500 Virginia Avenue, Suite 202		
(Address)		
Fort Pierce, FL 34982 (City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information concerning this matte	er, please call:	
Bruce R. Abernethy, Jr.	at (772) 489-4901	
(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	g amount:	
	\$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 60 liability company submits the following statement in o agent, or both, in the State of Florida.	8.508, Florida Statutes, the undersigned limited rder to change its registered office or registered	
1. The name of the limited liability company is: JME A	G Enterprises, LLC	
2. The mailing address of the limited liability company	is: 2650 S. Kings Hwy	
Fort Pierce, FL 34945		
12/23/2005	L05000122511	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered o Florida Department of State:	ffice address as shown on the records of the	
Bruce R. Abernethy, Jr.		
Name En S		
900 Virginia Avenue, Suite 6	SECRET SEP	
Address		
Fort Pierce, FL 34982	ARX ARX	
City, State and Zip		
6. The name and address of the new registered agent and/or office: Bruce R. Abernethy. Jr.		
Bruce R. Abernethy, Jr.		
Name		
500 Virginia Avenue, Suite 202		
Florida street address (P.O.	Box NOT acceptable)	
	34982	
City, State and	ł Zip	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as or or the operating agreement of the limited liability company (Signature of a member or authorized representative of a member)	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization	
(Signature of a member of authorized representative of a member)		
Bruce R. Abernethy, Jr.		
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent an comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of ny duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.	
(Signature of Registered Agent)		
Division of Corporations, P.O. Box	6327. Tallahassee, FL 32314	

FILING FEE: \$25.00