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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

Division of Corporations		
SUBJECT: JMB Properties, L.L.C. 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:		
Theresa M. Kenney, Es. Name of Person		
Duss, Kenney Safer, Hampton & Joos, P.A.		
4348 Southpoint Boulevard, Suite 101		
Jacksonville, Florida 32216 City/State and Zip Code		
+ Kenney@ axfirm.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Theresa M. Kenney, Esq. at (904) 543-4300 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	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: JMB P	roperties, L.L.C.
2. (a) Principal office address of limited liability compa	1 Land America
(Note: MUST BE STREET ADDRESS)	Co Asset Brokerage Services, Inc.
(b) Mailing address of limited liability company:	-
(Note: MAY BE POST OFFICE BOX)	
3. Date of filing/registration in Florida	<u> </u>
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Ford Bowlus Duss Morgan
Registered Office Address:	10110 SanJose Blvd. Jacksonville, Fl 32257
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	Theresa M. Kenney, Esq. Duss, Kenney, Safer, Hampton Dos
(MUST BE FLORIDA STREET ADDRESS)	4348 Southpoint Blud., Stc.101 Lacksonville ,FL32216
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 ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company or as other than the change of a member of authorized representative of a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote terwise provided in the articles of organization on the control of the cont
Printed or typed name of signees A MARIE KENNEY	I am the action to
I hereby accept the appointment as registered agent and domply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. On if this document is being filed to had address, whereby can firm that the limited liability compo	t agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely 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