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SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS

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J. BRYAN JUN - 7 2000

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JUAL Real Estate Investments (Name of Lim	nited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning thi	is matter to the following:	
Amy Ubbink		
(Name of Person)	97 PRVS	
	O7 JUN 19 PM 4: 56 LL LC	
JUAL Real Estate Investments	S, LLC	
(Firm/Company)		
	PH RPC	
250 Timberland Avenue	F. RATA	
(Address)		
	3,	
Longwood, Florida 32750		
(City/State and Zip Code)		
For further information concerning this matter,	please call:	
Amy Ubbink a	at (904) 563-1491	
(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 a	amount:	
✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2007

AMY UBBINK
JUAL-REAL ESTATE INVESTMENTS, LLC
250 TIMBERLAND AVENUE
LONGWOOD, FL 32750

SUBJECT: JUAL REAL ESTATE INVESMENTS, LLC

Ref. Number: L06000029806

We have received your document for JUAL REAL ESTATE INVESMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

been filed and is being returned for the following correction(s):

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 007A00038833

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Not the Mary In the tipe and introduced we seem to the control of the control of

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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 limite	d liability company is:	JUAL Real Estate Investm	ents, LLC	······································	
2. The mailing address of	the limited liability co	mpany is : 14141 Washi	burn Court		
Jacksonville, FLorida 3225	<u>U</u>		 	·	
03/21/2006 L06000029806			806		
3. Date of filing/registration	on in Florida	da 4. Document number			
5. The name of the registe Florida Department of S	red agent and the regis State:	stered office address as s	shown on the records o	of the	
	Amy Ubbink				
		Name			
	14141 Was	shburn Court			
		Address		DIVIS DIVIS	
		e, Florida 32250		SIOR SIOR	
	City,	State and Zip		SECRETAR SECRETAR IVISION OF C	
6. The name and address of	of the new registered a	gent and/or office:			
	Amy Ubbink	``````````````````````````````````````	- !	OF STATE ORPORATIONS	
	<u> </u>	Name	······································	STATE)RATIO	
	250 Tim	berland Avenue		on ₹	
	Florida street address	s (P.O. Box NOT accept	table)		
	Longwood	FL 32750			
	City, S	tate and Zip	•		
If the limited liability come confirmed that after the cland the business office of liability company, it is her of the members of the lim or the operating agreement (Signature of a member of authority).	nange or changes are methor registered agent with reby confirmed that the nited liability company to of the limited liability.	ade, the Florida street a ill be identical. Or, in the change(s) was/were au or as otherwise provide y company.	ddress of the registere ne case of a Florida lin thorized by an affirma	ed office nited ative vote	
Amy Ubbink					
(Printed or typed name of signee)					
I hereby ascept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if it address, I hereby confirm (Signature of Registered Agent)	ntment as registered a s of all statutes relative d accept the obligation his document is being that the limited liabili	gent and agree to act in e to the proper and com s of my position as region filed to merely reflect a y company has been no	this capacity. I furth plete performance of i stered agent as provid change in the register tified in writing of this	er agree to ny duties, led for in ed office s change.	

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

INHS18 (8/05)