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J. BRYAN

MAY 28 2009

EXAMINER

COVER LETTER

	ration Section on of Corporations		
SUBJECT: _	SJB NO. 2, LLC.		
SUBJECT	(Name of Lim	nited Liability Company)	
Dear Sir or M	adam:		
The enclosed	Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return	all correspondence concerning this m	natter to the following:	
Scott J. Bell			
Ocolt 6. Bell	(Name of Person)		
Delta Health Gr	oup, Inc.	SECT	8 3 7
	(Firm/Company)	HAS	127 F
2 North Palafor		SEE.	MAY 27 PM 1:57
	(Address)	FL OR	
Pensacola, FL	32502	Dr	A
	(City/State and Zip Code)		
For further in	formation concerning this matter, ple	ease call:	
Scott J. Bell	at (850) 430-0188	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Regist Divisio Cliftor 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations a Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclo	sed is a check for the following am	nount:	
☑ \$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. SJB NO. 2, LLC. 1. Name of the limited liability company: 2000 Villafane Drive 2. (a) Principal office address of limited liability company: Pensacola, FL 32503 (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: 2000 Villafane Drive (Note: MAY BE POST OFFICE BOX) Pensacola, FL 32503 July 17, 2006 L06000070823 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. o Registered Agent: Beggs & Lane Registered Office Address: 501 Commendenica Street Pensacola, FL 32502 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: David E. Hightower **NEW** Registered Office Address: Hightower Law Firm (MUST BE FLORIDA STREET ADDRESS) 1514 North 9th Avenue Pensacola If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (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 agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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

FILING FEE: \$25.00

(Signature of Registered Agent

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