L060000 75513

(Requestor's Name)					
(Addross)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
A. LUNI					
JUL 15 2008					
EXAMINER					

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SECKETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

Enclosed is a check for the following am	iount:			
	4 .			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314		
(Name of Person)	(Area	Code & Daytime Telephor	ne Number)	
JOHN J. JORDAN at (904) 993-2690		
For further information concerning this matter, ple	ease call	l:	•	
(City/State and Zip Code)				
MIDDLEBURG, FL 32068-5661	_		<i>(</i>	
			最る	
2465 BEGONIA DRIVE (Address)		_	P 2: 19 OF STATE E. FLORIDA	
DACE BECONIA DRIVE				g 1 t
(Firm/Company)			ARY SSE	
JOHN J. JORDAN, LLC		_	LAHASSE	
			TALL SEC	exception 1
JOHN J. JORDAN (Name of Person)	,	_	,	
IOUN 1 IOPPAN				
Please return all correspondence concerning this n	natter to	the following:		
		1	or ming.	
The enclosed Registered Agent/Registered Office	Change	and fee(s) are submitted f	for filing	
Dear Sir or Madam:			•	
(Name of Lin	nited Lia	ability Company)		
SUBJECT: JOHN J. JORDAN, LLC	- <u></u> -			•
TO: Registration Section Division of Corporations				

• 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 limite	d liability company: <u>JOHN J</u>	. JORDAN, LLC		0
	e address of limited liability com TBE STREET ADDRESS	npany: 2465 BEGONIA DRIVE MIDDLEBURG, FL 32068		0 0
(b) Mailing addres (Note: MAY	s of limited liability company: BE POST OFFICE BOX)	2465 BEGONIA DRIVE MIDDLEBURG, FL 32068		
31 JULY 2006 (7/31/2003). Date of filing/regis		L06000075513 4. Document number	7008 JULI SECRE	
0 0	ent and Registered Office show		Depth of State:	
Registered Ag		CORPORATION SERVICE	COMPANYU	
Registered Off	ice Address:	1201 HAYS STREET TALLAHASSEE, FL 32301	2: q	0
(b) Enter name of NEW Register	NEW Registered Agent and/or	NEW Registered Office add JOHN J. JORDAN	<u>ress</u> :	ŧ
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)				
		MIDDLEBURG	<u> </u>	
that after the change of office of the registered hereby confirmed that liability company or a limited liability comp	company is not organized under or changes are made, the Florida d agent will be identical. Or, in the change(s) was/were authoris s otherwise provided in the artically.	street address of the registered the case of a Florida limited lia	I office and the business ability company, it is	i
,	,			
JOHN J. JORDAN (Printed or typed name of signal printed)	gnee)			
I hereby accept the a comply with the provi am familiar with and F.S. Or, if this docum confirm that the limite	ppointment as registered agent sions of all statules relative to the accept the obligations of my pos- tent is being filed to merely reflect and liability company has been no	and agree to act in this capacit he proper and complete perfori sition as registered agent as pro sct a change in the registered o otified in writing of this change	y. I further agree to mance of my duties, and I ovided for in Chapter 608 ffice address, I hereby	},
(Signature of Registered Age	ent)			

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