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DIVISION OF CORPORATIONS

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J. BRYAN

JUNE 3 1 2008

EXAMINER

COVER LETTER

Division of Corporations SUBJECT: F.B. ENTERPRISE LIMITED LIABILITY COMPANY (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: JAMAS WARD (Name of Person) F.B. ENTERPRISE LIMITED LIABILITY COMPANY (Firm/Company) 925 SOUTH B STREET (Address) LAKE WORTH, FLORIDA 33460 (City/State and Zip Code) For further information concerning this matter, please call:) 572-1163 JAMAS WARD at ((Area Code & Daytime Telephone Number) (Name of Person) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ✓ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

DIVISION OF CORPORATION OR JUL 30 AM 11: 4

TO:

Registration Section

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: F.B. EN	ITERPRISE LIMITED LIABILITY COMPANY
2. (a) Principal office address of limited liability cor (<i>Note: MUST BE STREET ADDRESS</i>)	mpany: 925 SOUTH B STREET LAKE WORTH,FLORIDA 33460
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	L06000075516 4. Document number vn on the records of the Florida Dept. of State: JAMAS WARD 925 SOUTH B STREET
07/31/2006 3. Date of filing/registration in Florida	L06000075516 4. Document number
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	vn on the records of the Florida Dept. of State:
Registered Agent:	vn on the records of the Florida Dept. of State: JAMAS WARD
Registered Office Address:	925 SOUTH B STREET
Registered Office Address.	LAKE WORTH, FLORIDA 33460
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW</u> Registered Agent:	NEW Registered Office address: ROSA GOMEZ
NEW Registered Office Address:	925 SOUTH B STREET
MUST BE FLORIDA STREET ADDRESS	LAKE WORTH #,FL 33460
that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in	er the laws of the State of Florida, it is hereby confirmed a street address of the registered office and the business at the case of a Florida limited liability company, it is rized by an affirmative vote of the members of the limited icles of organization or the operating agreement of the
JAMAS WARD	
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to tam familiar with and accept the obligations of my po F.S. Or, if this document is being filed to merely reflection that the limited liability company has been n	and agree to act in this capacity. I further agree to the proper and complete performance of my duties, and I sition as registered agent as provided for in Chapter 608, ect a change in the registered office address, I hereby otified in writing of this change.

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