## 4060000089057

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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CUMMINGS & LOCKWOOD LLC

Doreen Bennett Paralegal

239.649.3129 Direct 239.263.0703 Fax dbennett@cl-law.com www.cl-law.com Street Address:

3001 Tamiami Trail North

Suite 400

Naples, FL 34103

Post Office Address: P.O. Box 413032 Naples, FL 34101

239.262.8311 Phone 239.263.0703 Fax

February 7, 2007

## <u>VIA FEDERAL EXPRESS</u> PERSONAL & CONFIDENTIAL

Division of Corporations Registration Section Clifton Building 26661 Executive Center Circle Tallahassee, Florida 32301

Re: JDK Properties I LLC thru XV

Dear Sir or Madam:

Enclosed for filing, please find signed original change of registered agent forms for all of the JDK Properties I LLC thru JDK Properties XV LLC. Also enclosed please find our check in the amount of \$375 @ \$25 per filing fee per entity.

Should you have any questions or comments, please do not hesitate to ball either Jonathan Gopman, Esquire at 239-649-3119 or me.

Sincerely,

Doreen Bennett

/db

Enclosures as stated

: Mr. Jack D. Kinder (w/o copies of enclosures)

Jonathan E. Gopman, Esquire (w/o copies of enclosures) Matthew N. Turko, Esquire (w/o copies of enclosures)

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: JDK Properties I LLC (Name of Limit	ited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Doreen Bennett (Name of Person)	2001 FEE SECRE I TALLAHA
Cummings & Lockwood LLC (Firm/Company)	FEB -9 FARY OF AHASSEE. F
3001 Tamiami Trail North, Suite 400 (Address)	OF STATE E. FLORIDA
Naples, Florida 34103	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, p	please call:
Doreen Bennett at	( <sup>239</sup> ) 649-3129
(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 an	nount:
<b>⋉</b> \$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.

agent, or both, in the State	e oj Fioriaa.				
1. The name of the limite	d liability company is	: JDK Properties	ILLC		
2. The mailing address of	the limited liability c	ompany is : _4	020 South Pine Aven	ue, Ocala, Florida	34480
9/11/2006			L06000089057		
			. Document num	ber	·
5. The name of the register Florida Department of S	red agent and the regi	istered office ac	ldress as shown o	n the records of	the
• • • • • • • • • • • • • • • • • • •		CLASP, INC.			
		Name			
	3001 Tamia	mi Trail North, Su	ite 400		
		Address			
		les, Florida 34103	<u> </u>	<b>=</b>	
	City	, State and Zip			_
6. The name and address of	I FEB CRET	T			
	Ja	ick D. Kinder		-q ARY SSE	
	4020 Sc	Name outh Pine Avenue		A P	
	Florida street addres	ss (P.O. Box No	OT acceptable)	LOR STA:	U
	Ocala	FL	34480	TE IDA	
	City,	State and Zip			
If the limited liability comconfirmed that after the chand the business office of liability company, it is her of the members of the lim or the operating agreement.	nange or changes are rethe registered agent we the confirmed that the liability company	made, the Florid vill be identical he change(s) wa y or as otherwis	la street address of Or, in the case of s/were authorized	of the registered of a Florida limit I by an affirmati	office ted ve vote
(Signature of a member or authori	zed representative of a memb	ber)			
Doreen Bennett, Authorized R	ер				
(Printed or typed name of signee)					
I hereby accept the appoi comply with the provision and I am familiar with an Chapter 608 F.S. Or, if t address, I bereby confirm	ntment as registered as of all statutes relatived accept the obligation his document is being that the limited liabil	agent and agree we to the proper ns of my positio filed to merely ity company ha	e to act in this cap and complete pe on as registered a reflect a change s been notified in	pacity. I further rformance of my gent as provided in the registered writing of this c	agree to duties, for in office hange.
(Signature of Registered Agent)	ack D. Kinder	<del></del>			
( )	n of Corporations, P	O. Box 6327,	Tallahassee, FL	32314	

**FILING FEE: \$25.00**