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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Construction by JEK LLC (Name of Limited Hiability 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:			
Keith Osheld (Name of Person)			
Construction Dr. JEK (Firm'Company)			
1324 Blue Marlins Blvd			
Holida Fl 34691 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Name of Person) at (727) 1086-1443 (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 amount:			
□ \$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.

1. The name of the limited liability company is:

OPSIVICE INDEDED

EX.

1. The mane of the immed habitity company is:		<u> </u>
2. The mailing address of the limited liability co	mpany is: 1324 Blue 1	Marlins.
Blad Holida, FT	3A(a)	
3. Date of filing/registration in Florida	<u>L070001045</u> 4. Document number	3
5. The name of the registered agent and the registered agent age	Ostfeld Name Marlin Blud	cords of the
6. The name and address of the new registered as Keith 0: 1324 Blve	Address State and Zip gent and/or office: Sifeld Name Name Signature S	SECHETARY AND A TABLE OF COURT OF COURT OF LAND A TO A T
	tate and Zip	• • •
If the limited liability company is not organized a confirmed that after the change or changes are m and the business office of the registered agent wi liability company, it is hereby confirmed that the the members of the limited liability company or the operating agreement of the limited liability confirmed that the limited liability confirmed that the operating agreement of the limited liability confirmed or symmetry of a member of authorized representative of a member of symmetry of the limited liability confirmed or symmetry of a member of symmetry of symmetry of a member of symmetry	ade, the Florida street address of the re- ill be identical. Or, in the case of a Flor- change(s) was/were authorized by an a as otherwise provided in the articles of ompany.	gistered office rida limited affirmative vote of
I hereby accept the appointment as registered as	gent and agree to act in this canacity.	I further goree to

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.

(Signature of Registered Agent)

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