## 107000026098

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SECRETARY OF STATE
AND ANASSEE, FLORID

7/5 chs.

## COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations				
SUBJECT:	Jasmine Lakes Acquisition, LLC				
ochole 1.	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted for filing.		
Please return	all correspondence concerning thi	s matter to the fo	llowing:		
Zvi Levin					
	Name of Person		-		
Lavish Pro	operty Management				
	Firm/Company		-		
850 SE 7t	h Street				
	Address		-		
Deerfield I	Beach, FL 33441				
	City/State and Zip Code		-		
E-mail	address: (to be used for future ann	ment.com ual report notific	ation)		
For further i	nformation concerning this matter,	please call:			
Zvi Levin		954 at (	570-0300		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Divi Clif 266	istration Section ision of Corporations fron Building I Executive Center Circle ahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314		
Enc	losed is a check for the following	amount:			
□ \$	25 Filing Fee	<b>□</b> \$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 605.0114 or 605.0116, 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. Na	me of the limited liability company:	s Acquisitio	on, LLC
2. (a)	850 SE 7th Street	(b)	
. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Deerfield Beach, FL 33441		
	3/9/2007	 L07	000026098
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Levin, Zvi		
). (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept	. of State:
	2070 North Ocean Blvd. #3		I SE
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	THE STATE OF THE S
	Boca Raton , FL	33431	FILED 1:00 NOV 23 PH 1:00 ALLAMASSEE, FLORIDGE
(b)	Levin, Zvi		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	****
	850 SE 7th Street		
	<u>NEW</u> Registered Office Address:		
	Deerfield Beach , FL	33431	
If tha l	imited liability company is not organized under the law	ve of the State	a of Florida, it is hereby confirmed that after
the cha agent v was/we	inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compa of the limited limited liabil	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Siona	ture of a member or authorized representative of a member	Zvi Lev	Printed or typed name of signee
I here provisi the obl to mere	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I did now wing of this change.	ree to act in the performance d for in Chap hereby confir	his canacity. I further goree to comply with the