

L07000042637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

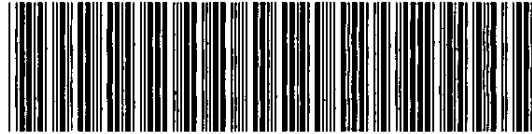
Special Instructions to Filing Officer:

A. LUNT

JUL 25 2008

EXAMINER

Office Use Only



100133300541

07/24/08--01016--002 **25.00

2008 JUL 24 P 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JLC GROUP LLC
(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:

WILLIAM CHALMERS
(Name of Person)

JLC GROUP LLC DBA LEARNING SKILLS NETWORK
(Firm/Company)

1990 MAIN STREET - SUITE 750
(Address)

SARASOTA FLORIDA 34236
(City/State and Zip Code)

2008 JUL 24 P 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

WILLIAM CHALMERS at (941) 726 8817
(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. Name of the limited liability company: JLC GROUP LLC
2. (a) Principal office address of limited liability company: 1990 MAIN STREET - SUITE 750
SARASOTA
FLORIDA 34236
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 1990 MAIN STREET - SUITE 750
SARASOTA
FLORIDA 34236
(Note: **MAY BE POST OFFICE BOX**)

APRIL 20, 2007
3. Date of filing/registration in Florida

L07000042637
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: WILLIAM J CHALMERS
Registered Office Address: 6665 DEERING CIRCLE
SARASOTA
FLORIDA 34240

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: WILLIAM J CHALMERS
NEW Registered Office Address: 1990 MAIN STREET - SUITE 750
(MUST BE FLORIDA STREET ADDRESS) SARASOTA
FL 34236

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

W J CHALMERS
(Printed or typed name of signee)

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 609, F.S. Or, if this document is being filed to merely request a change of the registered office and/or, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

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

FILED
JUL 24 P 2:22
TALLAHASSEE, FLORIDA
CLERK OF STATE