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SECRETARY OF STATE

D. BRUCE

JAN 2 0 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J&N Enterprise Holding (Name	gs LLC e 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	g this matter to the following:
Joseph P Capasso (Name of Person)	
J&N Enterprise Holdings LLC (Firm/Company)	
125 Venus St	SECRET!
(Address)	SSEE, FLORID
Jupiter, FI 33458 (City/State and Zip Code)	STATE LORIDA
For further information concerning this ma	atter, please call:
Jeannette Roberts	at (772) 263-1595
(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 follow	ing 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: J&N Enter	prise Holdings LLC
2. (a) Principal office address of limited liability comparation (Note: MUST BE STREET ADDRESS)	ny: 125 Venus St
(Note: MUST BE STREET ADDRESS)	Jupiter, FL 33458
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 312
	Hobe Sound, Fl
05/09/2007	L07000049681
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	Jeannette Roberts
Registered Office Address:	5120 SE Mariner Garden Cir E4
	Stuart. Fl 34997
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:
<u>NEW</u> Registered Agent:	Jeannette Roberts
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	125 Venus St
	Jupiter ,FL 33458
If the limited liability company is not organized under the that after the change or changes are made, the Florida strength office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member) Joseph P Capasso (Printed or typed name of signee)	eet address of the registered office and the business case of a Florida limited liability company, it is
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notificationally company of Registered Agent)	agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.

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