## 07000054364

(Requestor's Name)				
(Add	ress)			
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(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
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(Doc	ument Number)			
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Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:	i		
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Office Use Only



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SECRE IAM CORPORATIONS
OF SEP -4 PH 2: 54

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	JECT: JS CONSTRUCTION LLC (Name of	Limited Liabi	lity Company)	
Dear	Sir or Madam:			
The e	enclosed Registered Agent/Registered	Office Change	and fee(s) are submitted for fili	ng.
Pleas	e return all correspondence concerning	g this matter to	the following:	
ADA	LTO PEREIRA			_
	(Name of Person)		_	97 97 97 97 97 97 97 97 97 97 97 97 97 9
10.0	CONCEDUCTION I I C			SEP
<u> 18 C</u>	CONSTRUCTION LLC (Firm/Company)		<del></del>	-FREE
				PH PH
1011	I HONDO AVENUE #D			STATE ORATION
	(Address)		_	1011S
FOR	T WALTON BEACH, AL 32547			
	(City/State and Zip Code)		<del></del>	
For fi	urther information concerning this ma	tter, please cal	l:	,
ADA	LTO PEREIRA	at (850	) 699-4296	
	(Name of Person)		(Area Code & Daytime Telepho	one Number)
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314	
	Enclosed is a check for the follow	ing amount:		
	<b>✓</b> \$25 Filing Fee	<b>□</b> \$	55 Filing Fee & Certified Copy	

INHS18 (8/05)

## 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:	JS CONSTRUCTION LLC	
2. The mailing address of the limited liability com	npany is: 1011 HONDO AVENUE #D	•
FORT WALTON BEACH, AL 32547		·
05/22/2007	L07000054364	
3. Date of filing/registration in Florida 4. Document no		
5. The name of the registered agent and the register Florida Department of State:	ered office address as shown on the	records of the
JASON SANTANA		
1011 HONDO AVENU	Name E #D	
	Address	O. DIV
FORT WALTON BEAC	CH, AL 32547 tate and Zip	7S
• *	•	平 器
<ol><li>The name and address of the new registered age</li></ol>	ent and/or office:	OT SEP -4 PH
ADALTO PEREIRA		<b>2</b> 22
	ame	ORV ORV
1011 HONDO AVENUE		RATIO 2: 51
Florida street address	(P.O. Box NOT acceptable)	F NS
FORT WALTON BEACH	FL 32547	_
City, Sta	ate and Zip	
If the limited liability company is not organized unconfirmed that after the change or changes are may and the business office of the registered agent will liability company, it is hereby confirmed that the confirmed that	de, the Florida street address of the le identical. Or, in the case of a Florange(s) was/were authorized by a or as otherwise provided in the articl company.	registered office lorida limited n affirmative vote
ADALTO PEREIRA		
(Printed or typed name of signee)		
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fundaments, I hereby confirm that the limited liability	ent and agree to act in this capacity to the proper and complete perform of my position as registered agent a led to merely reflect a change in the company has been notified in writi	I further agree to ance of my duties, is provided for in registered office ng of this change.
(Signature of Registered Agent)	_ <del></del>	

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