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EXAMINER



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SECRETARY OF STATION DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Jupiter Wills and Trusts, PLLC (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	g this matter to the following:			
Kelly L. Valdivia	·			
(Name of Person)	·			
Jupiter Wills and Trusts, PLLC (Firm/Company)				
4440 PGA Blvd., Ste 600				
(Address)				
Palm Beach Gardens, FL 33410				
(City/State and Zip Code)				
For further information concerning this mat	ter, please call:			
Kelly Valdivia	at (561) 472-0802			
(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. Na	ame of the limited liability company: Jupiter Will	s and Trusts, PLLC		
2. (a	Principal office address of limited liability compan	v: 4440 PGA Blvd., Ste 600		
	(Note: MUST BE STREET ADDRESS)	Palm Beach Gardens, FL 33410		•
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4440 PGA Blvd., Ste 600 Palm Beach Gardens, FL 33410		10
				_
May 2	25, 2007	L07000055939		
3. Da	ate of filing/registration in Florida	4. Document number		
5. (a	a) Registered Agent and Registered Office shown on	the records of the Florida Dept.	of State:	
	Registered Agent:	Kelly L. Valdivia		
	Registered Office Address:	108 Intracoastal Pointe Dr.		
		Suite 100	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		Jupiter, FL 33477		SE
			000	프유
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:)I 27	NETAS.
	NEW Registered Agent:	Kelly L. Valdivia		
	NIDWI D. C. L. J. OCC A J.J.	4440 BO & Blood	X	
	NEW Registered Office Address:	4440 PGA Blvd.		ESC.
	(MUST BE FLORIDA STREET ADDRESS)	Suite 600	EL 22410	22
		Palm Beach Gardens ,	FL 33410	ತ್ತ್
that a office hereb liabil limite	Ilimited liability company is not organized under the after the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the by confirmed that the change(s) was/were authorized ity company or as otherwise provided in the articles and liability company.	et address of the registered office case of a Florida limited liability by an affirmative vote of the mer	e and the busing company, it is mbers of the lin	ess mited
	L. Valdivia ad or typed name of signee)			
I her comp am fa F.S. confi	reby accept the appointment as registered agent and ily with the provisions of all statutes relative to the plus with and accept the obligations of my position. Or, if this document is being filed to merely reflect a symmetry that the limited liability company has been notified.	agree to act in this capacity. I furoper and complete performance in as provided change in the registered office a change in the registered office a change.	rther agree to of my duties, a 'for in Chapter ddress, I hereb	and I r 608, by

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