

LO7 000059143

(Requestor's Name)

JTW Group LLC
2875 NE 191st Street, Ste 200
Aventura, FL 33180

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

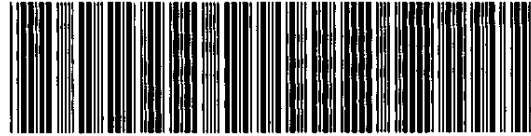
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EXAMINER



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08/02/10--01037--013 **25.00

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10 AUG - 2 PM 2:43
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: JTW GROUP LLC
2. (a) Principal office address of limited liability company: 2875 NE 191ST ST SUITE 200
☐ (Note: MUST BE STREET ADDRESS) AVENTURA, FL 33180
- (b) Mailing address of limited liability company: 2875 NE 191ST ST SUITE 200
☐ (Note: MAY BE POST OFFICE BOX) AVENTURA, FL 33180
3. Date of filing/registration in Florida: 06/05/2007
4. Document number: 407000059143
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: SANFORD N. REINHARD ESQ
Registered Office Address: 1290 WESTON RD. SUITE 201
WESTON, FL 33326
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: JOEL T. WAOSWORTH
NEW Registered Office Address: 705 NATURES COVE ROAD
(MUST BE FLORIDA STREET ADDRESS) DANIA BEACH, FL 33004

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.

Joel T. Wadsworth
Signature of a member or authorized representative of a member

JOEL T. WAOSWORTH
Printed or typed name of signer

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Joel T. Wadsworth
Signature of Registered Agent

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

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20 AUG -2 PM 2:00
TALLAHASSEE, FL