## L07000060369

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C. LEWIS

APR 3 0 2012

EXAMINER

## \*OVER LETTER

Registration Section Division of Corporations	en e			
SUBJECT: JENNY Name of Limited Li	'G. LLC ability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
• • • • • • • • • • • • • • • • • • •				
DOUGLAS J. JEFFREY, ESQ.  Name of Person				
LAW OFFICES OF DOUGLAS J. JEFFREY, P. Firm/Company	<u>A.</u>			
6625 MIAMI LAKES DRIVE EAST, STE 379 Address				
MIAMI LAKES, FLORIDA 33014 City/State and Zip Code	<del></del>			
DJ@JEFFREYLAWFIRM.COM  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DOUG JEFFREY at ( 30				
Name of Person	Area Code & Daytime Telephone Number			
	MAILING ADDRESS:			
	Registration Section Division of Corporations			
<u> </u>	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 co	ompany:	JENNY G. LLC
2. (a) Principal office address of	limited liability company	6625 MIAMI LAKES DR. EAST
(Note: MUST BE STRE	ET ADDRESS	SUITE 365 MIAMI LAKES, FL 33014
(b) Mailing address of limited	liability company:	6625 MIAMI LAKES DR. EAST
(Note: MAY BE POST C	OFFICE BOX)	SUITE 365 MIAMI LAKES, FL 33014
6/7/07		L07000060369 2 7
3. Date of filing/registration in Fl	orida	4. Document number
5. (a) Registered Agent and Reg	gistered Office shown on t	he records of the Florida Dept. of State.
Registered Agent:		GUILLERMO J. GONZALEZ
Registered Office Address	:	6625 MIAMI LAKES DR. EAST SUITE 365 MIAMI LAKES, FL 33014
(b) Enter name of <u>NEW Registered</u> Agent: <u>NEW Registered Office A</u>	.ddress:	V Registered Office address:  DOUGLAS J. JEFFREY, ESQ.  6625 MIAMI LAKES DR. EAST
<u>(MUST BE FLORIDA ST</u>	<u> (REET ADDRESS)</u>	SUITE 379 MIAMI LAKES ,FL33014
confirmed that after the change or	changes are made, the Flatered agent will be identifized agent will be identifized that the change(s) ility company or as other limited liability company	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
GUILLERMO J. G	ONZALEZ	
Printed or typed name of signee		
I hereby accept the appointment of comply with the provisions of all sand Fam familiar with and accept Chapter 608, F.S. Or, if this docu address I hereby confirm that the	as registered agent and agent tatules relative to the pro- the obligations of my pos- ment is being filed to mer limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	MINII 1	

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