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B. BOSTICK
MAY 3 0 2012
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	SUBJECT: JONESNATION, LLC Name of Limited Liability Company			
Dear 9	Sir or Madam:			
Dom.	or Maddin.			
The en	nclosed Registered Agent/Registered	Office Change and fcc(s) are submitted for filing.		
Please	e return all correspondence concerning	ig this matter to the following:		
	WEW JONES			
	KIRK JONES Name of Person			
	JONESNATION, LLC Firm/Company			
	1225 ALGERIA AVE		る国家	
	Address	ALLAHASSEE, FLORIDA	2 2 2 9	
	CORAL GABLES, FL 3313	34 m	7	
	City/State and Zip Code		다.	
E	JONESEST@MSN.COM	M Continuation)	9: 30	
For fu	arther information concerning this ma	atter, please call:		
	KIRK JONES	at (305) 3213229	•	
	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:	JONESENATION, LLC			
2. (a) Principal office address of limited liability company	2601 S BAYSHORE DR			
(Note: MUST BE STREET ADDRESS)	STE 750 MIAMI, FL 33133			
(b) Mailing address of limited liability company:	1225 ALGERIA AVE			
(Note: MAY BE POST OFFICE BOX)	CORAL GABLES, FL 33134			
07/31/2007	L07000078683			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	•			
Registered Agent:	KIRK JONES			
Registered Office Address:	1177 GERORGE BUSH BLVD STE 204			
	DELRAY BEACH, FL 33483			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	KIRK JONES			
NEW Registered Office Address:	1225 ALGERIA AVE			
(MUST BE FLORIDA STREET ADDRESS)	CORAL GABLES ,FL33134			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member KIRK JONES Printed or typed name of signee	lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, MS. Or, if this document is being filed to me address, I hereby confirm that the limited linoility compan	igree to act in this capacity. Is further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office y has been notified in writing of this change.			
Signature of Registered Agent				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				

INHS18 (05/08)