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•	(Requestor's Name)				
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GARY L. SIMMONS ATTORNEY AT LAW Licensed in Florida and North Carolina

PO Box 1221 Apopka, FL 32704-1221 (407) 637-4994 Fax (321) 256-5131 SimmonsLaw@cfl.rr.com

REGISTRATION SECTION DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

SUBJECT: J & G COMPLETE AUTO REPAIR, LLC

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

JOSEPH RIZKALLAH, 535 Little Wekiva Road, Altamonte Springs, FL 32714

E-mail address: JRIZKAL@YAHOO.COM

For further information concerning this matter, please call: JOSEPH RIZKALLAH (407) 230-7301

Sincerely, E.\Simmons

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed check for the following amount: 255 Filing Fee ____\$55 Filing Fee & Certified Copy INHS18 (5/08) (Adapted for personal use)



MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

• 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: J & G COMPLETE AUTO REPAIR, LLC

2. (a) Principal office address: 2199 Lee Road, Winter Park, FL 32789

(b) Mailing address: 2199 Lee Road, Winter Park, FL 32789

3. Date of filing/registration in Florida: 08/27/2007

4. Document number: L07000087550

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: CHRISTINE RIZKALLAH Registered Office Address: 535 Little Wekiva Road, Altamonte Springs, FL 32714 US

(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>: <u>NEW</u> Registered Agent: JOSEPH RIZKALLAH <u>NEW</u> Registered Office Address: 535 Little Wekiva Road, Altamonte Springs, FL 32714 US

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.

PHOENICIA INVESTMENTS CORPORATION, Sole Member

Bν KALLAH, President

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.

JØSERH KIZKALLAH, Resident Agent