

L07000087602

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BRYAN OCT 17 2008

J. BRYAN

OCT 27 2008

EXAMINER



10-22-08

To:

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2008

JACK L BEATTY
JAMON LLC
1023 US HIGHWAY 19
HOLIDAY, FL 34691

SUBJECT: JAMON LLC
Ref. Number: L07000087602

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We have received your document for JAMON LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 908A00054104

Please see attached proper form.
Thank you

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ja Mon LLC
(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 this matter to the following:

Jack L Beatty
(Name of Person)

(Firm/Company)

1023 US HWY 19
(Address)

Holiday, FL 34691
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack L Beatty at (727) 939-2500
(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

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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: Jj Mon LLC
2. (a) Principal office address of limited liability company: 1023 US HWY 19
Holiday, FL 34691
(Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: 1023 US HWY 19
Holiday, FL 34691
(Note: MAY BE POST OFFICE BOX)
- 8-27-2007
3. Date of filing/registration in Florida
- LO7000087602
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: Corporate Creations International Inc.
- Registered Office Address: 11380 Prosperity Farms Rd. #221E
Palm Beach, FL 33410
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
- NEW Registered Agent: Jack L Beatty
- NEW Registered Office Address: 1023 US HWY 19
Holiday, FL 34691
(MUST BE FLORIDA STREET ADDRESS)

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.

[Signature]
(Signature of a member or authorized representative of a member)

Jack L Beatty
(Printed or typed name of signee)

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.

[Signature]
(Signature of Registered Agent)

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

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