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Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FF

Account Number : 076424003301

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LLC REGISTERED AGENT CHANGE DJ'S FLORIDA CONDO, LLC

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D. BRUCE

MAR 16 2010

EXAMINER

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED QUOENTOOR))) BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in oragent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited der to change its registered office or registered
1. Name of the limited liability company:	DJ's Florida Condo, LLC
2. (a) Principal office address of limited liability compa	ny:
(Note: MUST BE STREET ADDRESS)	511 Bayshore Drive, PH2 Fort Lauderdale, Fi 33304
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	511 Bayshore Drive, PH2 Fort Lauderdale, FL 33304
2/8/08	L08000014792
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	D. Michael O'Leary
Registered Office Address:	101 E. Kennedy Boulevard
	Tampa, Florida 33602
(b) Enter name of NEW Registered Agent and/or NI	CW Registered Office address: 5
NEW Registered Agent:	TK Registered Agent, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	101 E. Kennedy Boulevard Suite 2700 Tampa
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited
John T. Johansen, President	_
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pandates of the state of	agree to act in this capacity. I further agree to ropes and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.
Division of Corporations, P.O. Box 6	327, Tallahassee, FL 32314

FILING FEE: \$25.00