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Office Use Only



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KEALY EXAMINER JUN 19 2012

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Name of		Vatson, LL Liability Cor	
Dear Sir or Madam:			
The enclosed Registered Agent/Registere	d Office (Change and fe	e(s) are submitted for filing.
Please return all correspondence concerni	ng this ma	atter to the fol	lowing:
Joseph H. Watson, Jr Name of Person	·	····	
Firm/Company			
4120 Steamboat Bend East	, #506		
Fort Myers, Florida 339 City/State and Zip Code	19		
E-mail address: (to be used for future annual repo			
For further information concerning this m Joseph H. Watson, Jr.	atter, plea	se call: 7 <i>57</i> 239	481-5051 Jame - Sept 931-1276 Oct - May
Name of Person	(le & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration of P.O. Box 6	Corporations
Enclosed is a check for the follow	ving amo	unt:	
\$25 Filing Fee		\$55 Filin	g 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.

Name of the limited liability company:	J&G Watson, LLC			
2. (a) Principal office address of limited liability company	y:			
(Note: MUST BE STREET ADDRESS)				
(b) Mailing address of limited liability company:	Ser 1			
(Note: MAY BE POST OFFICE BOX)				
	L08000034700			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Bolanos Truxton, PA			
Registered Office Address:	12800 University Drive, Suite 350 Fort Myers, Florida 33907			
<u>NEW</u> Registered Agent:<u>NEW</u> Registered Office Address:	Joseph H. Watson, Jr.			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :				
(MUST BE FLORIDA STREET ADDRESS)	4120 Steamboat Bend East, #506 Fort Myers ,FL33919			
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 ident liability 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	laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization			
Joseph H. Watson, Jr. Printed or typed name of signee	_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to metadress, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely 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