L08000037050

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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408-37050 Change of RA

N. CAUSSEAUX

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT:	SJM CONSU	JLTING GROUP, LLC
		Name of Limite	ed Liability Company
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/R	egistered Office	Change and fee(s) are submitted for filing.
Please	return all correspondence of	concerning this m	matter to the following:
	Todd S. Payn Name of Perso		
	Zebersky & Pay		
	4000 Hollywood Blvd Address	., Suite 675-S	
	Hollywood, FL City/State and Zip		
Е	tpayne@zpll	O.COM unnual report notificati	tion)
For fu	rther information concerning	g this matter, ple	ease call:
	Todd S. Payne, Esq.	at (_	954) 989-6333
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADD	RESS:	MAILING ADDRESS:
	Registration Section Division of Corporations		Registration Section
	Clifton Building		Division of Corporations P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	e	Tallahassee, Florida 32314
	Enclosed is a check for the	ne following amo	ount:
	\$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:	SJM CONSULTING GROUP, LLC			
2. (a) Principal office address of limited liability co	ompany:			
(Note: MUST BE STREET ADDRESS)	813 N. State Road 7 Hollywood, FL 33021			
(b) Mailing address of limited liability company	Fig. 5 T			
(Note: MAY BE POST OFFICE BOX)	P.O. Box 798 Fort Lauderdale, FL 33302			
04/11/2008	L08000037050 ES			
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:	CORPDIRECT AGENTS, INC.			
Registered Office Address:	515 East Park Avenue Tallahassee, FL 32301			
(b) Enter name of NEW Registered Agent and	or NEW Registered Office address:			
NEW Registered Agent:	Zebersky & Payne, LLP			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES)				
	Hollywood ,FL 33021			
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company if is hereby confirmed that the choof the members of the limited liability company or a or the operating greement of the limited liability considerable of a member or authorized representative of a member	der the laws of the State of Florida, it is hereby e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.			
David Boden				
Printed or typed name of signee				
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this doctionent is being file address, I hereby confirm that the limited liability confirms the liability confirms the limited liability confirms the liability conf	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office company has been notified in writing of this change.			
Signature of Registered Agent	-			