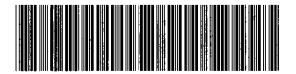
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(Red	questor's Name)	
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2010 JAN 21 PK 12: 34 SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

JAN 2 2 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JenMarc, LLC Name of L	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning to	this matter to the following:	
Marc Sherman Name of Person		
Jen Marc, LLC	Z01	
Firm/Company 1867 Burdock D. Address	SECRICIONAN 21 PH 12: 34 ALLAHASSEE, FI DIND C. 34787	
Winter Garden, FL 3 City/State and Zip Code	34787	
Msherm 1313@aol. E-mail address: (to be used for future annual report no	com diffication)	
For further information concerning this matte	er, please call:	
Marc Sherman Name of Person	at (407) 601 9521 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	g amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

an area was

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.

3 , ,	
1. Name of the limited liability company:	arc, UC
2. (a) Principal office address of limited liability company	10.00
(Note: MUST BE STREET ADDRESS)	Winter Garden, FL 34787
(b) Mailing address of limited liability company:	1867 Burdock Dr.
(Note: MAY BE POST OFFICE BOX)	Winter Garden, FL 34787
6/23/08	L08000061171
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	Marc Sherman 3
Registered Office Address:	1867 Burdock Dr = 11
	77.7
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:
NEW Registered Agent:	第 元 ら
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability 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	orida 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
Signature of a member or authorized representative of a member Marc Sherman	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the pround and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	