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DIVISION OF CORPORATION

COVER LETTER

Division of Corporations		
		•
	DJR Collective, LLC	
Name o	of Limited Liability Company	
Dear Sir or Madam:		
The analoged Registered Agent/Registeres	of Office Change and fee(s) are submitted for filling	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Duane L. Rolli		
Name of Person		
DJR Collective, LLC		
Firm/Company		
6609 Pinewood Lane		
Address		
Devete October 5to 11, 000	000	
Punta Gorda, Florida 339 City/State and Zip Code	982	
City/State and Zip Code		
diralli@ambaramail.com		
drolli@embarqmail.con E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this ma	natter, please call:	
Duane L. Rolli	at (941) 575-4453 Area Code & Daytime Telephone Number	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	ations Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
4 425 1 mmg 100	\$55 Fining Fee & Certified Copy	

TO: Registration Section

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:	DJR Collective, LLC		
2. (a) Principal office address of limited liability company	y: 6609 Pinewood Lane		
(Note: MUST BE STREET ADDRESS)	Punta Gorda, Florida 33982		
(b) Mailing address of limited liability company:	same as above		
(Note: MAY BE POST OFFICE BOX)			
10/02/2008	L08000093505		
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:	SPIEGEL & UTRERA. P.A.		
Registered Office Address:	1840 SW 22nd St.		
	4th Floor 교육 기계 Miami, Fl 33145 US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	Duane L. Rolli		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6609 PINEWOOD LN. FL 33982		
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 of a member of authorized representative of a member			
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 proving and I am familiar with and accept the obligations of my pochaster 608, F.S. Or, if this document is being filed to me address, I hereby confine 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.		

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