108000098646	
(Requestor's Name) (Address)	
(Address)	900137121969
(City/State/Zip/Phone #)	10/27/0801011023 **25.00
(Business Entity Name)	
(Document Number) rtified Copies Certificates of Status	OB OCT 27 AHII: 47
Office Use Only	J. BRYAN 0СТ 2 8 2008 EXAMINER

# COVER LETTER

TO: Registration Section Division of Corporations

## SUBJECT: FJA HOLDINGS, LLC.

(Name of Limited Liability Company)

Dear Sir or Madam:

٦.

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

IDANIA FERNANDEZ, LEGAL ASSISTANT (Name of Person)

WEISBURD, EISEN & POSSENTI, P.A.

· (Firm/Company)

7700 NORTH KENDALL DRIVE, SUITE 711

(Address)

MIAMI, FLORIDA 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

**IDANIA FERNANDEZ** 

(Name of Person)

305 ) 274-5011

at (

(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 amount:

☑ \$25 Filing Fee

**55** Filing Fee & Certified Copy



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#### 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: FJA HOL	DINGS, LLC
<ol> <li>(a) Principal office address of limited liability component (<i>Note: MUST BE STREET ADDRESS</i>)</li> </ol>	pany: <u>15551 S.W. 77TH AVENUE</u> MIAMI, FLORIDA 33157
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	15551 SW 77TH AVENUE MIAMI, FLORIDA 33157
OCTOBER 20, 2008	L08000098646 4. Document number on the records of the Florida Dept. of State: SCOTT E. KANDELL 2665 S. BAYSHORE DRIVE
OCTOBER 20, 2008 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:	SCOTT E. KANDELL
Registered Office Address:	2665 S. BAYSHORE DRIVE     5       SUITE 605     8       MIAMI, FLORIDA 33133     8
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address: SCOTT E. KANDELL
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2665 S. BAYSHORE DRIVE SUITE 603 MIAMI ■,FL 33133
If the limited liability contrany is not organized under that after the change or changes are made, the Florida s	the laws of the State of Florida, it is hereby confirmed street address of the registered office and the business he case of a Florida limited liability company, it is
that after the change or changes are made the Florida s office of the registered agent will be identical. Or, in thereby confirmed that the change(s) was/were authoriz liability company of as otherwise provided in the articl limited liability company (Signature of a member/or authorized representative of a member)	ed by an affirmative vote of the members of the limited es of organization or the operating agreement of the
(Signature of a member or authorized representative of a member) IDANIA FERNANDEZ, LEGAL ASSISTANT (Printed or typed name of signee)	nd agree to act in this capacity. I further agree to e proper and complete performance of my dulies, and I tion as registered agent as provided for in Chapter 608, ct a change in the registered office address, I hereby tifted in writing of this change.

(Signature of Registered Agent)

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

INHS18 (05/08)