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COVER LETTER

Division of Corporations		
SUBJECT: US TEC	HNOLOGIES, LLC	
Name of Limit	ed Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
DEAN M. DENEGRI		
Name of Person		
US TECHNOLOGIES, LLC		
Firm/Company		
801 BUNKER VIEW DR.		
Address		
APOLLO BEACH, FL 33572		
City/State and Zip Code		
DMDLIGHTS@AOL.COM		
DMDLIGHTS@AOL.COM E-mail address: (to be used for future annual report notification)	ution)	
For further information concerning this matter, pl	lease call:	
i or rataior information concerning this matter, pr	Case Carri	
DEAN DENECDI	040	
DEAN DENEGRI at (Area Code & Daytime Telephone Number	
· ····································	The Court of Say and Total photo Name of	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	i aiiaiia5500, 1 ioiiua <i>323</i> 14	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing 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.

1. Name of the limited liability company:	JS TECHNOLOGIES, LLC		
2. (a) Principal office address of limited liability compar	y: US TECHNOLOGIES, LLC		
(Note: MUST BE STREET ADDRESS)	429 CANARY ISLAND CT. ORLANDO, FL 32828		
(b) Mailing address of limited liability company:	US TECHNOLOGIES, LLC		
(Note: MAY BE POST OFFICE BOX)	429 CANARY ISLAND CT. ORLANDO, FL 32828		
04/09/2009	L080000101		
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:	LOUIS J. MCCALL		
Registered Office Address:	US TECHNOLOGIES, LLC S S S S S S S S S S S S S S S S S S		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	DEAN M. DENEGRI		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	US TECHNOLOGIES, LLC N SERVICE NO		
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 or authorized representative of a member			
LOUIS J. MCCALL Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or lifthis document is being filed to m address. I hereby confirm that the limited liability compared	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office my has been notified in writing of this change.		

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

ig large of Registered Agent