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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
A. LUNT			

Office Use Only

OCT -4 2011

EXAMINER



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10/03/11--01029--009 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	***************************************	UNLIMITED LLC mited Liability Company	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning the	is matter to the following:	
	FRANK J WILSON		
	Name of Person		
	JBR UNLIMITED LLC		
	Firm/Company		
	1576 LONGBOW DRIVE		
	Address		
	LAKELAND, FL 33810		
	City/State and Zip Code		
	JBRUNLIMITEDFL@AO JBRUNLIMITED@AOL.COM		
Е	-mail address: (to be used for future annual report noti	fication)	
For fu	orther information concerning this matter,	, please call:	
AL	ICE A MILLER - ACCOUNTANT	at (<u>863</u>)858-7777	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:			
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

TO:

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:	JBR UNLIMITED LLC			
2. (a) Principal office address of limited liability compan	y:			
(Note: MUST BE STREET ADDRESS)	1576 LONGBOW DRIVE LAKELAND, FL 33810			
(b) Mailing address of limited liability company:	SAME AS ABOVE			
(Note: MAY BE POST OFFICE BOX)				
10/31//2008	L0800010239			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Depth of State:				
Registered Agent:	FRANK J WILSON			
Registered Office Address:	1576 LONGBOW DRIVE			
NEW Registered Agent:	ALICE A MILLER - LLAEJJ@AOL.COM			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: ALICE A MILLER - LLAE LIGAOL COM				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	ALICE'S ACCOUNTING & TAX SRVCS 4820 US HWY 98 NORTH, STE 4			
	LAKELAND ,FL33809			
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				
FRANK J WILSON	_			
Printed or typed name of signec				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm 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.			
Signature of Registered Agent				