

## Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000068939 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

## REGISTERED AGENT CHANGE

JILL FRAN LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu M. THOMES

MAR **2 5** 2009

## 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: JILL FRAN	LLC	
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 7301 SW 57TH CT., STE, 565 SOUTH MIAMLEL 33143	D
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
03/19/2009	L09000027321	
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:	ROLLICK, NEIL ESO.	
Registered Office Address:	2525 PONCE DE LEON BLVD, SUITE 400	
•	CORAL GABLES, FL 39134	3
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	<u> </u>	E B U
NEW Registered Agent:	The Greenwald Group	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7301 SW 57th Court	
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	ase of a Florida limited liability company, it is	
ALLEN R. GREENWALD by A Howard as attorney in fact (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 proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my auties, and I as registered agent as provided for in Chapter 608 change in the registered office address, I hereby In writing of this change.	},
(Signature of Registered Agent) by A Howard as at		

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