Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

DEC 11 2009

EXAMINER

From:

Account Name : GUNSTER, YOAKLEY, ETAL. (WEST PALM BEACH)

Account Number : 076117000420

: (561)650-0728

Phone Fax Number : (561)655-5677

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please \*\*

Email Address:

## REGISTERED AGENT CHANGE SNJ PATENTS, LLC

3+

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$43.75

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### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: SNJ Patents, LLC		
Name of Limited 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:		
Lisa A. Schneider, Esq.		
GUNSTER, YOAKLEY & STEWART, P.A. Firm/Company		
777 South Flagler Drive, Sulte 500 East Address		
West Palm Beach, FL 33401 City/State and Zip Code		
mcramer-scharlatt@gunster.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Mary E. Cramer-Scharlatt, C.P., FRP at ( 561 ) 650-0728		
Name of Person 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 & Certified Copy		

#### H090002546413

# 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:	SNJ Patents, LLC	
2. (a) Principal office address of limited liability company	y: 11621 Kew Gardens Avenue	
(Note: MUST BE STREET ADDRESS)	Suite 109 Palm Beach Gardens, FL 33410	
(b) Mailing address of limited liability company:	11621 Kew Gardens Avenue	
(Note: MAY BE POST OFFICE BOX)	Suite 109 Palm Beach Gardens, FL 33410	
March 25, 2009	L09000029156	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	·	
Registered Agent:	GY Corporate Services, Inc.	
Registered Office Address:	777 South Flagler Drive Suite 500 East West Palm Beach, FL 33401	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>Kathryn K. Theofilos</u>		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11621 Kew Gardens Avenue Suite 109 Palm Beach Gardens ,FL33410	
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		
Lisa A. Schneider, Esq., Authorized Representative		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the profisions of all statutes relative to the profit and Lam familiar with and accept the obligations of my po Chapter 608 It.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signalul of Begintered Ment Kathryn K. Theofilos	gree to act in this capacity. I further agree to oper and complete performance of my duties sition as registered agent as provided for me rely reflect a change in the registered office y has been notified in writing of this change.	
Dission of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		

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