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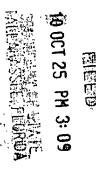
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S. HAWKES

OCT 2 6 2010

EXAMINER

COVER LETTER

Division of Corp	orations				
SUBJECT:	Fc	our Denta	al Jays, L	LC	
Subsect.			ability Con		_
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered	Office Cha	nge and fee	e(s) are submitted for filing.	
Please return all correspondent	ondence concerning	g this matte	er to the foll	owing:	
Jeff	rey Goodman				
	me of Person				
Four E	ental Jays, LLC		<u>.</u> .:		
Fit Harpooly to tap	m/Company 64/09/14/14/07/2014	Charles Straight	· ,		
<u> </u>	O Sandy Key				
A Transfer of the Artificial Control of the	Address		,	· 医斯特特	
	e Beach, FL 3295	51			
City/S	tate and Zip Code				
E-mail address: (to be use	corestrength.us for future annual report	notification)			
For further information of	concerning this mat	ter, please	call:		
Jeffrey Go	odman	_at (<u>3</u>	21)	7259999	
Name of Per	son		Area Cod	e & Daytime Telephone Number	
_ STREET/COURI	ER ADDRESS:		MAILING	ADDRESS:	
Registration Section	on ·	Registration Section			
Division of Corpor		Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Co Tallahassee, Florid		Tallahassee, Florida 32314			
Enclosed is a ch	eck for the followi	ing amoun	t:		
\$25 Filing Fee		Γ	\$55 Filing	g 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:	Four Dental Jays, LLC		
2. (a) Principal office address of limited liability company	450 Sandy Key		
(Note: MUST BE STREET ADDRESS)	Melbourne Beach, FL 32951		
(b) Mailing address of limited liability company:	450 Sandy Key		
(Note: MAY BE POST OFFICE BOX)	Melbourne Beach, FL 32951		
03/30/2009	L09000030796		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on			
Registered Agent:	Jeffrey J Goodman		
Registered Office Address:	245 Atlantic Drive Melbourne Beach, FL 32951		
NEW Registered Agent: NEW Registered Office Address:	450 Sandy Key		
(MUST BE FLORIDA STREET ADDRESS)			
	Melbourne Beach ,FL 32951		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating recent of the limited liability company. Signature of a member or authorized representative of a member Jeffrey Goodman	lorida street address of the registered office		
Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a compty with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 60%, S. On, if this document is being filed to me address, thereby 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/Segistered Agent			
Division of Corporations, P.O. Box 63 FILING FEE: \$			

INHS18 (05/08)