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SECRETARY OF STATE
SHIT AHASSEE, FLORIDA

J. BRYAN

MAR 2 6 2009

EXAMINER

COVER LETTER

Division of Corp	orations					
SUBJECT:	JBAS	SS PF	ROPERTI	ES LLC		
	Name of I	imited	Liability C	Company	1-1	
Dear Sir or Madam:						
The enclosed Registered	Agent/Registered C	Office (Change and	fee(s) are submi	tted for filing.	
Please return all corresp	ondence concerning	this m	atter to the	following:		
JO	DEL W BASS					
	nme of Person					
	PROPERTIES LLC	;		10 MAR 25 PH 1: 13 SECRETARY OF STATE FALLAHASSEE, FLORIC		
2801 S\	V 3RD TERRACE Address				CORETARY OF STATE	5 PH I
	HOBEE, FL 34974 tate and Zip Code				TATE ORIDA	: :: ::3
JBASS3 E-mail address: (to be use	9@HOTMAIL.CON	/I	n)			
For further information	concerning this matt	er, plea	ise call:			
JOEL W	BASS	at (863)		8705	
Name of Per	son	_ \-	Area	Code & Daytime Tele	phone Number	
STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Control	on rations enter Circle		Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314	4	
Enclosed is a ch	eck for the followin	ng amo	unt:			
\$25 Filing Fed	•		 √ \$55 Fi	ling Fee & Certi	fied 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:	JBASS PROPERTIES LLC			
2. (a) Principal office address of limited liability company	2801 SW 3RD TERRACE			
(Note: MUST BE STREET ADDRESS)	OKEECHOBEE, FL 34974			
(b) Mailing address of limited liability company:	2801 SW 3RD TERRACE			
(Note: MAY BE POST OFFICE BOX)	OKEECHOBEE, FL 34974			
MAY 15, 2009	L09000047687			
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:	UNITED STATES CORPORATION AGE			
Registered Office Address:	13302 WINDING OAKS BLVD			
	A-100 TAMPA, FL 33612			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address JOEL W BASS 2801 SW 3RD TERRACE OKEECHOBEE FI 34974:			
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				
JOEL W BASS 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 provisions of all statutes relative to the provisions of all statutes relative to the provisions of my portugated to the chapten 608, F.S. Or, if this/document is being filed to me address. I hereby confirm that the limited liability company Signature of Registered Agent	agree 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.			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				