100000428 (Requestor's Name) (Address) 100183609811 (Address) . (City/State/Zip/Phone #) 07/28/10--01011--011 \*\*25.00 PICK-UP WAIT MAIL Ζ. (Business Entity Name) (Document Number) Certificates of Status Certified Copies \_\_\_\_\_ Special Instructions to Filing Officer: D. BRUCE Office Use Only 

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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

JJBR, LLC

Name of Limited Liability Company

Dear Sir or Madam:

SUBJECT:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Terassa Geach Name of Person

JJBR, LLC Firm/Company

2202 S. Babcock Street, Suite 201 Address

> Melbourne, FL 32901 City/State and Zip Code

tgeach@supremetitlellc.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Terassa Geach Name of Person

**STREET/COURIER ADDRESS:** 

at (<u>321</u>)

725-0115

Area Code & Daytime Telephone Number

## 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

**Registration Section** 

**Clifton Building** 

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, Florida 32301

\$55 Filing Fee & Certified Copy



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## 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:	JJBR, LLC
2. (a) Principal office address of limited liability compan	y: 2202 S. Babcock Street
( <i>Note: MUST BE STREET ADDRESS</i> )	Suite 201 Melbourne, FL 32901
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
04/21/2010	L10000042842
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Fept. of State:	
Registered Agent:	Terassa Geach
Registered Office Address:	2202 S. Babcock Street Suite 201 Melbourne, FL 32901
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2202 S. BABCOCK STREET SUITE 201 MELBOURNE ,FL 32901
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.	
Terassa Geach	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or) if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.	
Signature of Registered Agent	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	

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