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| (Re | questor's Name) | | |
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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|--|---|--|--|
| PBJECT: FJ Investment Group, 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 m | atter to the following: | | |
| Francis John Hamilton II Name of Person | | | |
| FJ Investment Group, LLC Firm/Company | | | |
| PO Box 2399 Address | <u></u> | | |
| Valrico, FL 33594 City/State and Zip Code | | | |
| FJInvestmentGroup@gmail.com E-mail address: (to be used for future annual report notification) | on) | | |
| For further information concerning this matter, ple | ase call: | | |
| Francis John Hamilton II at (| 410) 340-1504 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 | \$55 Filing Fee & Certified Copy | | |

INHS18 (5/08)

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.

| | A | | |
|--|---|---|--|
| Name of the limited liability company: | FJ Investment Group, | LLC S | |
| 2. (a) Principal office address of limited liability comp | pany: | | |
| (Note: MUST BE STREET ADDRESS) | 2508 Oak Landing Dr. Brandon, FL 33510 | FILE FOR STARY | |
| (b) Mailing address of limited liability company: | | <u>고</u> 중 중 중 중 중 중 중 중 중 중 중 중 중 중 중 중 중 중 중 | |
| (Note: MAY BE POST OFFICE BOX) | PO Box 2399 Valrico, FL 33594 | | |
| 02/01/2011 | L1100001 | 3572 | |
| 3. Date of filing/registration in Florida | 4. Document number | | |
| 5. (a) Registered Agent and Registered Office shown | on the records of the Florida D | ept. of State: | |
| Registered Agent: | Law Offices of Jeffrey A | Law Offices of Jeffrey A. Herzog, PA | |
| Registered Office Address: | 3106 ALT US 19 Palm Harbor, FL 34683 | | |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u> <u>NEW Registered Agent</u> : | NEW Registered Office addre | | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 2508 Oak Landing Dr. | 2508 Oak Landing Dr. | |
| MOST DE TEURIDA STREET ADDRESS | Brandon | ,FL <u>33510</u> | |
| If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as or or the operating agreement of the limited liability company. | re Florida street address of the r | registered office | |
| Signature of a member or authorized representative of a member | . | | |
| Francis John Hamilton II Printed or typed name of signee | | | |
| I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp | nd agree to act in this capacity. Proper and complete performa Prosition as registered agent as merely reflect a change in the pany has been notified in writin | I further agree to ince of my duties, s provided for in registered office g of this change. | |
| Signature of Registered Agent | | | |

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