

# L11000129057

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

DEC 8 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JD MARINE TECHNOLOGY LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Julia Kloiber

(Contact Person)

JD MARINE TECHNOLOGY LLC

(Firm/Company)

9608 NW 7TH CIRCLE APT 1318

(Address)

PLANTATION, FL 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

Julia Kloiber

(Name of Contact Person)

at ( 954 ) 839-4596

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &  
Certified Copy

**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

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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: JD MARINE TECHNOLOGY LLC
2. (a) Principal office address of limited liability company: 9608 NW 7TH CIRCLE APT 1318

**(Note: MUST BE STREET ADDRESS)**

Plantation, FL 33324

- (b) Mailing address of limited liability company:

9608 NW 7TH CIRCLE APT 1318

**(Note: MAY BE POST OFFICE BOX)**

Plantation, FL 33324

11/14/2011

L11000129057

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:

Daniel D Kloiber

Registered Office Address:

9608 NW 7TH CIRCLE APT 1318  
Plantation, FL 33324

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Julia Kloiber

**NEW** Registered Office Address:

9608 NW 7TH CIRCLE APT 1318

**(MUST BE FLORIDA STREET ADDRESS)**

Plantation, FL 33324

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.

Julia Kloiber

Signature of a member or authorized representative of a member

JULIA KLOIBER

Printed or typed name of signee

*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.*

Julia Kloiber

Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**

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