## L12000009530

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B. BOSTICK
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EXAMINER

## COVER LETTER

TO: **Registration Section Division of Corporations		
SUBJECT: JAVV, 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	g this matter to the following:	
R. Brady Osborne, Jr., Esq.		
Name of Person	-	
Osborne & Osborne, P.A. Firm/Company		
798 S. Federal Hwy. Ste 100		
Address	12 SEL ALI	
	LAHASSI	-17
Boca Raton, Florida 33432	ASS	CHARGE TO
City/State and Zip Code	[LL]	
rhodoshornons som	of STATE PH 1: 25	
rbo@osbornepa.com  E-mail address: (to be used for future annual report	notification) — — — — — — — — — — — — — — — — — — —	. •
E-man address. (to be used for future annual report	RATE C	<b>)</b>
For further information concerning this mat		•
R. Brady Osborne, Jr.  Name of Person	at ( 561 ) 395–1000  Area Code & Daytime Telephone Number	_
	• •	
STREET/COURIER ADDRESS:	MAILING ADDRESS: Registration Section	
Registration Section Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	,	
Enclosed is a check for the followi	ing amount:	
x \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## 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 3 2			
1. Name of the limited liability company:	<sub>4</sub> C		
2. (a) Principal office address of limited liability company	/: 4110 Kiaora Street		
(Note: MUST BE STREET ADDRESS)	Coral Gables, Florida 33133		
(b) Mailing address of limited liability company:	4110 Kiaora Street		
(Note: MAY BE POST OFFICE BOX)	Coral Gables, Florida 33133		
01/20/2012	L12000009530		
	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:		
Registered Agent:	Lisa Braden		
Registered Office Address:	4623 Forest Hill Boulevard Suite 108-1		
	West Palm Beach, FL 33415		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW</u> Registered Agent:	V Registered Office address:  R. Brady Osborne, Jr.		
<del></del>			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	798 S. Federal Hwy, Ste. 100  Boca Raton, Florida 33432  FL		
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 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  3. 1012.  Printed or typed name of signee	12 APR I		
I hereby accept the appointment as registered agent and aging comply with the provisions of all statutes relative to the propared I am familiar with and accept the obligations of my position that the limited liability company is address. I hereby confirm that the limited liability company is	ree to act in this capacity. I further agree to per and complete performance of fly duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		
Signature of Registated Agent			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00			

INHS18 (05/08)