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<u>l</u> ii	
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## COVER LETTER

<b>j</b> i'i					
TO: Registration Section Division of Corporations					
JAK Capital LLC					
	me of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning	l his matter to the following:				
Keith Goldbaum					
Name of Person					
JAK Capital LLC					
Firm/Company					
7280 W. Palmetto Park Road, Suite 20	l 02 - Intl Plaza				
Address					
Boca Raton, FL 33433					
City/State and Zip Code					
goldboca@aol.com					
E-mail address: (to be used for future an	Bual report notification)				
For further information concerning this matter	please call:				
Keith Goldbaum	561 395-5511				
Name of Person	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 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following	amount:				
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

. Na	me of the limited liability company:	AK Capital	LLC					
	7280 W. Palmetto Park Road, 🧣	uite 202		7280 W.	Palmetto Park F	Road	, Suite	202
. (,	Principal office address of limited liab (Note: MUST BE STREET AD				Mailing address of limite (Note: MAY BE POS			-
	International Plaza			Internatio	onal Plaza			
	Boca Raton, FL 33433			Boca Ra	ton, FL 33433			
	03/18/2013			L1300004	10865			
	Date of filing/registration in	Torida	4.		Document number			
(a)	Keith Goldbaum	ļ						
	Registered Agent and Registered Office shown	on the records o	f the Florid	a Dept. of State	<b>:</b> :			
	5355 Town Center Rd, Ste 801							
	Registered Office Address (MUST BE FI	ÖRIDA STREET	'ADDRES.	<u>S)</u>				
	Boca Raton	, FL 33486				17		
(b)						1, 101 1	17 NOV 21	
	Enter name of NEW Registered Agent and/or	<u>NEW Registere</u> II	d Office ac	<u>idress</u> :				
	7280 W. Palmetto Park Road,	 Suite 202					PH 11: 55	ر در سسد سده
	NEW Registered Office Address:				•		មា មា	
	International Plaza						91	
	Boca Raton	. F	L 33433					
the line char gent w	mited liability company is not organiz nge or changes are made, the Florida's rill be identical. Or, in the case of a Fl	d under the la	aws of the	: State of Flo	orida, it is hereby co and the business of shereby confirmed (	ntirm ffice c	ed that a of the reg se chang	fter gistere e(s)

he articles of organization or the operating agreement of the	
	Keith A. Goldbaum
Signature of a mambar or outhorized corresponding will mambar	Deliveral as the religion of the con-

Signature of a member of authorized representative of a member

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 605, 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 document. notified in writing of this change.

Signature of Registered Agent