## L130000 69343

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## COVER LETTER

Division of Corporations	•			
JL Lakes SUBJECT:				
	of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offic	re Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Michael S. Weiner, Esq.				
Name of Person				
Sachs Sax Caplan, PL				
Firm/Company	<del></del>			
6111 Broken Sound Pkwy NW #200				
Address				
Boca Raton, FL 33487				
City/State and Zip Code				
epeterson@indigolakesgolf.com				
E-mail address: (to be used for future annu	al report notification)			
For further information concerning this matter, p	please call:			
Michael S. Weiner	561 994-4499			
Name of Person	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 a	Enclosed is a check for the following amount:			
☑ \$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 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

1.	Na	me of the limited liability company: JL LAKES LLC	,		· · · · · · · · · · · · · · · · · · ·
2.	(a)		_ (	b)	
		Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		312 INDIGO DRIVE		312	INDIGO DRIVE
		DAYTONA BEACH, FL 32114	_	DAY	TONA BEACH, FL 32114
		5/13/2013		L130	00069343
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				
		Registered Agent and Registered Office shown on the records of the Judith A. Hartley	e Floric	la Dept, c	of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<del></del>
		312 Indigo Drive			
		Daytona Beach	32119	)	
					<del></del>
	(b)	Enter name of NEW Registered Agent and/or NEW Registered C			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (Control of the New Registered (C</u>	office a	<u>ddress</u> :	
		Eddy Peterson			
		NEW Registered Office Address:			<del></del>
		312 Indigo Dr.			
		Daytona Beach FL	32114	ļ	
the age wa	cha int v s/we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the I	he reg pility c the lir	istered company nited lia liability	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
_)				رما	Printed or typed name of signee
1 h pro the to a not	nerel ovisi obl mere ified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre in of all statutes relative to the proper and complete p igations of my position as registered agent as provided ity reflect a change in the registered office address, I had in writing of this change.  The state of the property of the pr	e to ac perforn for in pereby c	ct in thi.	s capacity. I further agree to comply with the

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