## M05000001039





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2006 JUN 29 PH 12: 11
SECRETARY OF STATE
SECRETARY OF STATE

MD (1891

## COVER LETTER

	ration Section on of Corporations			
SUBJECT:	Phoenix Financial Futures, t	LC .		
•	(Name of	Limited Liabili	ty Company)	
Dear Sir or M	adam:			
The enclosed	Registered Agent/Registered	Office Change	and fec(s) are submitted	for filing.
Please return	all correspondence concernin	g this matter to t	the following:	
David Jenn	ings			
	(Name of Person)		<u>-</u>	
Phoenix F	inancial Futures, LLC			
	(Firm/Company)		· ·	
941 Avon	Rd			7. 2
	(Address)		-	TALLY
West Palm Beach, FL 33401				JUN 29 RETARY AHASS
	(City/State and Zip Code)		-	
For further in	formation concerning this ma	tter, please call:		PH 12: 11 OF STATE E.FLORIO
David Jenni	ngs	561 at (	707-8000	
<u> </u>	(Name of Person)		Area Code & Daytime T	elephone Number)
Regist Divisio Cliftor 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations a Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee, Florida 32314		
Enclo	sed is a check for the follow	ing amount:		
□\$25	Filing Fee	× \$5.	5 Filing Fee & Certified	Сору

INHS18 (8/05)

## 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.

ageni, or noin, in the state of Fiorida.				
1. The name of the limited liability of	ompany is: Phoeni	x Financial Futures, LLC	·	
<ol><li>The mailing address of the limited West Palm Beach, FL 33401</li></ol>	liability company	is: 222 Lakeview Ave., PH3	·	
February 28, 20 <b>97</b>	<u></u>	M05000001039		
3. Date of filing/registration in Florid	a	4. Document number		
<ol> <li>The name of the registered agent ar Florida Department of State: Willia</li> </ol>	nd the registered of im Colleran	fice address as shown on the	records of the	
941	Avon Rd. Name		2006 SE(	
Wes	Address t Palm Beach, FL	33401	JUN 2	
	City, State ar	id Zip	33.58	
6. <b>The name and address of the new n</b> David Je	-	l/or office:	2006 JUN 29 PH 12: 11 SECRETARY OF STATE TALLAHASSEE.FLORIU	
222 Lak	eview Ave., PH3			
		Box NOT acceptable)		
West Pa	Im Beach, FL 3	3401		
	City, State and	Zip	_	
If the limited liability company is not confirmed that after the change or chand the business office of the registers liability company, it is hereby confirm of the members of the limited liability or the operating agreement of the limited limite	inges are made, the ed agent will be ide ned that the change y company or as of ited liability compa	Florida street address of the entical. Or, in the case of a Fless was/were authorized by an herwise provided in the article	registered office lorida limited n affirmative vote	
(Signature of a recomber or authorized representati		<del></del>		
David Jennings, Managing Member	r			
(Printed or typed name of signee)				
I hereby accept the appointment as recomply with the provisions of all state and I am familiar with and accept the Chapter 608, F.S. Or, if this document address, I hereby confirm that the lim	egistered agent and des relative to the obligations of my nt is being filed to i ited liability compl ember	l agree to act in this capacity proper and complete perform position as registered agent a nerely reflect a change in the any has been notified in writin	. I further agree to ance of my duties, is provided for in registered office ng of this change.	
(Signature of Registered Agent)				

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