## HOSOCOOPILL

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
APR 2 3 2013		
L. SELLERS		

Office Use Only



400246532364

04/22/13--01015--014 \*\*25.00

April 15, 2013

## **VIA US MAIL**

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: JLN Enterprises, L.L.C.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35 \$25 LLC to cover the required filing fee: "

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

Adam Saldaña

REGISTERED AGENT SOLUTIONS, INC.

## 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:	JLN ENTERPRISES, L.L.C.
2. (a) Principal office address of limited liability comp	any: 5485 Beltline Rd.
(Note: MUST BE STREET ADDRESS)	Suite 380 Dallas, TX 75254
(b) Mailing address of limited liability company:	5485 Beltline Rd.
(Note: MAY BE POST OFFICE BOX)	Suite 380 Dallas, TX 75254
04/13/2005	M0500001966
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:	Brenda Ellrod
Registered Office Address:	Custom Accounting 1428 E. Semoran Blvd. Ste 105
	Apopka, Fl. 32703
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address: Registered Agent Solutions, Inc.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr. Suite A
1.203. DB 1 BORIDITSTREET TIEDRESS	Tallahassee ,FL 32301
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the chang of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Thereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company.  Jaclyn Wright, Asst. Secretary	e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any.
Signature of Registered Agent	

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