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To:

Division of Corporations

Fax Number

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT CHANGE JIK CREEK GP LLC

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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:	JIK CREEK GP LLC
2. (a) Principal office address of limited liability compan	у:
(Note: MUST BE STREET ADDRESS)	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016-5897
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016-5897
12/29/2010	M10000005791
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:	C T CORPORATION SYSTEM
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>Corporate Creations Network Inc.</u>	
	Sorphia State Stat
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11380 Prosperity Farms Road #221E Palm Beach Gardens FL33410
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 pegistered 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 afficinative vote of the members of the limited liability company or as otherwise provided in the articles of programment or the operating agreement of the limited liability company. Signature of a sember or authorized representative of a number Privated or typed large of signer By: Kristine Roy, as Attny-in-Factor of my duties, and I am registered appointment as registered agent and agree to act in this capacity. Therefore a company with line provisions of all statutes relative to the proper and complete performance of my duties, and I am register with and descept the obligations of my position as registered agent as provided for in large periods. S. Of it may do ungerty being filed to merely reflect a change in the registered office addressed by try fortune that the fonted liability company has been notified in writing of this change. Signature of Registered Agent By: Kristine Roy, Special Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	
INHS18 (05/08)	