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D. BRUCE

SEP 29 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: San, bel 1983, LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Sarah Hart Name of Person		
Julys Enterprises. Inc.		
SIGI Vernomble S. Address Address		
Sdina m N SS 4 3 6 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Sarah Hart at (952) 285 · 6245 Name of Person at (952) 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 amount:		
\$25 Filing Fee \$25 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 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:	1 1983, LLC
2. (a) Principal office address of limited liability company	a
(Note: MUST BE STREET ADDRESS)	Edina, MN SS436
(b) Mailing address of limited liability company:	SIOI Vernon Ave S.
(Note: MAY BE POST OFFICE BOX)	Edina, MN SS436
3. Date of filing/registration in Florida	W11 6000 60 12 4 4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	Sohn Tonsager
Registered Office Address:	500 Perininkle Day
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW</u> Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office address: Mark Pucher clo Jerrys Foods 1700 Perimbyle Way Sanibel, FL 33957 FL
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of the proving Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization of SCRY OF STATE O

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

Signature of Registered Agent