## 10000050940

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DIVISION OF CORPORATIONS

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: LJL Holdings, Inc.  (Name of Corporate	ion)	
DOCUMENT NUMBER: P00000050940		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jim Marks (Name of Contact Pe	erson)	
LJL Holdings, Inc. (Firm/Company)		
324 North Dale Mabry Highway, Suite 100 (Address)		
Tampa, FL 33609-1265 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Jim Marks at (Name of Contact Person)	813 ) 289-0154 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corporation organized under the laws of the State of Florida  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LJL Holdings, Inc.
2. The principal office address: 324 North Dale Mabry Highway, Suite 100, Tampa, FL 33609-1265
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/24/2000 Document number: P00000050940
4. Date of incorporation/qualification: 05/24/2000 Document number: P00000050940  5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  JAMES P. MARKS  3825 HENDERSON BLVD, SLUTE 400
JAMES P. MARKS
3825 HENDERSON BLVD. SUITE 400
3825 HENDERSON BLVD. SUITE 400 TAMPA FL 33629 US
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JAMES P. MARKS
324 North Dale Mabry Highway, Suite 100
(P.O. Box NOT acceptable) Tampa, FL 33609-1265
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature or on officer or director)  Tames Marks President (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signatura of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)