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### MILLER, SOUTH & MILHAUSEN, P.A.

ATTORNEYS AT LAW

2699 LEE ROAD, SUITE 120

WINTER PARK, FLORIDA 32789

RICHARD D. BAXTER
DANIEL N. BRODERSEN
PETER F. CARR, JR.
C. TERESA GARRETT
JEFFREY P. MILHAUSEN
J. GARY MILLER
J. TODD SOUTH

TELEPHONE (407) 539-1638

FACSIMILE (407) 539-2679

February 5, 2003

#### <u>VIA CERTIFIED MAIL – RETURN RECEIPT REQUESTED</u>

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

JLM Structures II, Inc.;

Our File No.: 2105-1.

#### Dear Sir/Madam:

Enclosed please find the original signed Statement of Change of Registered Office or Registered Agent or Both for Corporations, along with our firm check in the amount of \$35.00 representing the filing fee to change the Registered Agent.

If you have any questions or need any additional information, then please do not hesitate to contact our office. I am

V**ory** truly yours

Jeffrey P. Milhausen, Esq.

JPM/rl Enclosures

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

Pursuant to the prov	=				orida St	atutes,
the undersigned corporate submits the following		-	=		nt or h	oth in
the State of Florida.					.,, 0, 0	<i></i>
1. The name of the co	rporation is: J	LM Structures	II, Inc.			
2. The mailing addres	s of the corporation	is: <u>322 East</u>	Central Boule	evard, Suite	≥ 2001	· ·
Orlando, FL	32801	· · · · · · · · · · · · · · · · · · ·			···	
3. Date of incorporati	on/qualification:	2/5/2003	Document n	umber: P0300	0001352	34
4. The name and addr	ess of the current rep	gistered agent and	office:			
., UCC F	ILING & SEARCH SI	ERVICES, INC.			03	
526 EA	ST PARK AVENUE			AF	03 FEB 2	( )
TALLA	HASSEE, FLORIDA	32301			. 12	The second second
<u>Atte</u>	er, South & Milh ntion: Jeffrey Lee Road, Suite	ausen, P.A. P. Milhausen,	·	Not Acceptable	MII: 33	Ö
Wint	er Park, FL 3278	19				· .
The street address of i	l be identical.				_	
Such change was auth authorized by the boar	orized by resolution	n duly adopted by	its board of dire	ectors or by an	officer	so
Ma	My		<u> </u>	2-10-0	3	
(Signature of an offi	cer, chairman or vice cha	irman of the board)		(Date)		-
John L. Mays,	President inted or typed name and t	itle)	- <u>v</u> -	** ·		
Having been named as forporation, I hereby further agree to comperformance of my during the egistered agent.					ated s capaci nplete n as	<i>ty.</i>
(Signature	of Registered Agent)		2 · / 0 - (Date)	· · · · · · · · · · · · · · · · · · ·		
f signing on behalf of an e						
Jeffrey P. Milh	ausen	Sh.	areholder/Att			_
(Typed or	Printed Name)		(Ca	pacity)		
	*** FI	LING FEE: \$35.	.00 * * *			

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