1. Entity Name	MENT # <b>P99000</b> (	090512		FILED	
J.J. REAL	L ESTATE INVESTMENT GR	OUP, INC.			
				00 APR -3 AM 8: 0	00
Principal Place	of Business	Mailing Address		SECRETARY OF STA	TE.
1818 S. AUSTRA	alian avenue	1818 S. AUSTRALIAN AVEN	WE	TALLAHASSEE. FLOR	AUA
SUITE 400 West Palm Bei	ACH FL 33409	SUITE 400 West Palm Beach FL 334	109-6447	_	
		,		4 JOHN 1882 MA 1811 & 2012 BOSH BOTH FAIRS ÁGNA 1811	3 00/7) EUST HOLD (US 1881
2. Principal Pla	ace of Business	3. Mailing Address			
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS S	PACE
City & State		City & State	<u> </u>	4. FEI Number 05/007	Applied For
7:-	Country	7.0	Country	05-075700	Not Applicable 8.75 Additional
Zip	Country	Z <sub>1</sub> p	·		ee Required
	6. Name and Address of Current	Registered Agent		-7. Name and Address of New Registered A	gent
		1 ,	Name		
ROY, DAVE K			Street Address	P.O. Box Number is Not Acceptable)	
1818 SUITE	S. AUSTRALIAN AVENUE	1			
	F PALM BEACH FL 33409	i			7in Code
		:	City	FL_	Zip Code
				to the term of Charles of Clarida	ļ
8. The above r	named entity submits this statement fo	r the purpose of changing its	registered office or regis	ed agent, or both, in the State of Florida.	ļ
8. The above r	named entity submits this statement fo	or the purpose of changing its	registered office or regis	ed agent, or both, in the state of Florida.	
SIGNATURE			·		<del></del>
SIGNATURE	Signature, typed or printed name of registered agent	and title of applicable. (NOTE	Registered Agent signature requi		
SIGNATURE 9. This corpor Tax filing re-	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so.	and trie of applicable. (NOTE  FILE NOW!  After MAY 1, 20	Pegistored Agent signature roqui	10, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
9. This corpor Tax filing re (See criteria	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so.	end take of applicable. (NOTE  FILE NOW!  After MAY 1, 200  Make Check Payab	Pepistored Agent signature required 19 \$150.00 00 Fee will be \$550.00 le to Department of S	10. Election Campaign Financingfrust Fund Contribution	_ Added to Fees
9. This corpor Tax filing re (See criteria	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so.	end take of applicable. (NOTE  FILE NOW!  After MAY 1, 200  Make Check Payab	Pegistored Agent signature roqui	10, Election Campaign Financing Trust Fund Contribution	_ Added to Fees
9. This corpor Tax filing re (See criteria	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND ROY, DAVE K	end trie of applicable. (NOTE  FILE NOW!  After MAY 1, 20  Make Check Payab  DIRECTORS	I! FEE IS \$150.00 00 Fee will be \$550.00 le to Department of S 12. TITLE NAME	10. Election Campaign Financingfrust Fund Contribution	DIRECTORS IN 11
9. This corpor Tax filing re (See criteria 11. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	end trie of applicable. (NOTE  FILE NOW!  After MAY 1, 20  Make Check Payab  DIRECTORS	Pegistored Agent signature required to the second of the s	10. Election Campaign Financingfrust Fund Contribution	DIRECTORS IN 11
9. This corpor Tax filing re (See criteria 11. Title NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND ROY, DAVE K	FILE NOW! After MAY 1, 20 Make Check Payab  DIRECTORS  Delete	Projectored Agent signature required in the second of the	10. Election Campaign Financingfrust Fund Contribution	Added to Fees DIRECTORS IN 11 Change Addition
9. This corpor Tax filing re- (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	end trie of applicable. (NOTE  FILE NOW!  After MAY 1, 20  Make Check Payab  DIRECTORS	Pegistored Agent signature required to the second of the s	10. Election Campaign Financingfrust Fund Contribution	DIRECTORS IN 11
9. This corpor Tax filing re (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20 Make Check Payab  DIRECTORS  Delete	Projectored Agent signature required in the second of the	10. Election Campaign Financingfrust Fund Contribution	Added to Fees DIRECTORS IN 11 Change Addition
9. This corpor Tax filing re (See criteria  11. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20 Make Check Payab  DIRECTORS  Delete	I! FEE IS \$150.00  OF Fee will be \$550.00  le to Department of S  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing rei (See criterie 11. 101LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20 Make Check Payab  DIRECTORS  Delete	Projectored Agent signature requirements  If FEE IS \$150.00  OD Fee will be \$550.00  ile to Department of S  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	10. Election Campaign Financingfrust Fund Contribution	Added to Fees DIRECTORS IN 11 Change Addition
9. This corpor Tax filing re (See criteria 11. TIBLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20! Make Check Payab DIRECTORS  Delete	I! FEE IS \$150.00  O Fee will be \$550.00  It to Department of S  12.  ITILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing rei (See criterie 11. 101LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20! Make Check Payab DIRECTORS  Delete	Projectored Agent signature required to the second of the	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing re (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 20! Make Check Payab DIRECTORS  Delete	Projistored Agent signature requirement of \$11. FEE IS \$150.00  OD Fee will be \$550.00  ile to Department of \$12.  TITLE  NAME  STREET ADDRESS  CITY-\$1-ZIP  TITLE  NAME  STREET ADORESS  CITY-\$1-ZIP  TITLE  NAME  STREET ADORESS  CITY-\$1-ZIP  TITLE  NAME  STREET ADORESS	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing rei (See criteria 11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	After MAY 1, 200  After MAY 1, 200  Make Check Payab  DIRECTORS  Delete  Delete	Projistored Agent signature required in the state of Stat	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing rei (See criteria 11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	After MAY 1, 200  After MAY 1, 200  Make Check Payab  DIRECTORS  Delete  Delete	Projistored Agent signature required in the state of Stat	10. Election Campaign Financingfrust Fund Contribution	Added to Fees
9. This corpor Tax filing rer (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete	Pegistored Agent signatura requirement of State	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing rei (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	After MAY 1, 200  After MAY 1, 200  Make Check Payab  DIRECTORS  Delete  Delete	Projistored Agent signature required in the state of Stat	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing rer (See criteria  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete	Pegistored Agent signatura requirement of S  1! FEE IS \$150.00  00 Fee will be \$550.00  1e to Department of S  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing re- (See criteria 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete	Pegistored Agent signatura requirement of S  I! FEE IS \$150.00  OD Fee will be \$550.00  It to Department of S  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing re (See criteria  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete	Pegistored Agent signatura requirement of State	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing re (See criteria  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete  Delete	Pegistored Agent signatura requirement of State of the State of St	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change
9. This corpor Tax filing re (See criteria  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so, a on back)  OFFICERS AND  OROY, DAVE K  1818 S. AUSTRALIAN AVENUE	FILE NOW! After MAY 1, 200 Make Check Payab DIRECTORS  Delete  Delete  Delete  Delete	Pegistored Agent signatura requirement of State	10. Election Campaign Financingfrust Fund Contribution	Added to Fees  DIRECTORS IN 11  Change

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

