F17937

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COVER LETTER

Division of Corporations		
SUBJECT: J.B. Jones, Inc.		
(Name of Corporation	on)	
DOCUMENT NUMBER: F18937		
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.	
Please return all correspondence concerning this matter to the fo	following:	
Robert Fitzsimmons		
(Name of Contact Per	rson)	
KUBICKI DRAPER	·	
(Firm/Company)		
•		
25 West Flagler Street, Penthouse		
(Address)		
Miami, FL 33130		
(City/State and Zip C	ode)	
For further information concerning this matter, please call:		
Robert Fitzsimmons at (3	305 982 6741 Area Code & Daytime Telephone Number)	
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of	State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
•	Tallahassee FL 32301	

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: J.B. Jones, Inc.
2. The principal	office address: 13815 North West 19th Avenue, Miami, Florida 33054
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 02/10/1981 Document number: F18937
	d street address of the current registered agent and registered office on file with the rtment of State:
	Robert Fitzsimmons
	2950 SW 27th Avenue
	Miami, FL 33233-9075
6. The name and (if changed):	2950 SW 27th Avenue Miami, FL 33233-9075 d street address of the new registered agent (if changed) and /or registered office Robert Fitzsimmons 25 West Flagler Street, Penthouse
	Robert Fitzsimmons
	25 West Flagler Street, Penthouse (P.O. Box NOT acceptable)
	Miami, FL 33130
The street addr as changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
	TB. JONES (Printed or typed name and title)
I hereby accept I further agree of my duties, an document is be	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
	812:107
	ignature of Registered Agent) (Date)
If signing on be	ehalf 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)