P04000040969

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: MIMI JAME, INC. (Name of corporation)		
DOCUMENT NUMBER: P04000040969		
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:		
Name of contact person)		
MIMI JANE, INC (Firm/Company)		
3196 DEER Chase Run (Address)		
Longwood, Florida 32779 (City/state and zip code)		
For further information concerning this matter, please call:		
Don Moore at 407 375-6647		
(Name of contact person) at (407) 375-6647 (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 409 E. Gaines Street Tallahassee, FL 32399		

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this 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: Mimi TANE, INC.
2. The principal office address: 3196 DEER Chase Run
Longwood, Florida 32779
3. The mailing address (if different): P.O. Box 915665
Longwood, Florida 32779
4. Date of incorporation/qualification: 314/04 Document number: POA 0000 40969
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Corporation Service Company
Florida Department of State: Corporation Service Company 1201 Hays Street
TAllahassee, Florida 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DON MOORE
(P.O. Box NOT acceptable)
Longwood Florida 32779
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 of an officer or director) Amanda Moore Director (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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)