## P04000093703

(Re	questor's Name)	_
(Ad	dress)	
•		
(Ade	dress)	
(Cit	y/State/Zip/Phone	e #)
_	_	_
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Dos	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer	
	imig officer,	
		İ

Office Use Only



200076407642

06/26/06--01009--007 \*\*35.00

PA Coly.

E. Roberts [ 11] 0.3 anne



## **COVER LETTER**

TO: Amendment Division of	nt Section f Corporations			
SUBJECT: Jeffi	rey Charles, Inc. (Name of Co	rporation)		
DOCUMENT NUMBER: P04000093703				
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:				
	Charles B. Turner (Name of Con	tact Person)		
Jeffrey Charles, Inc. (Firm/Company)				
725 Primera Blvd, Suite 145 (Address)				
Lake Mary, FL 32746 (City/State and Zip Code)				
	ation concerning this matter, please ca			
Charles B. Turr	ner me of Contact Person)	at (407) 333-0081 (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 ${\bf \hat{F}}$ FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, ange is submitted for a corporation organiz	red under the laws of the State of Florid	la
	er to change its registered office or register	ed agent, or both, in the State of Florida.	
	the corporation: Jeffrey Charles, Inc.		
2. The principal	office address: 725 Primera Blvd., Sui	te 145, Lake Mary, FL 32746	
3. The mailing a	address (if different): Same		
4. Date of incor	poration/qualification: 06/18/2004	Document number: P04000937	703
	d street address of the current registered age rtment of State:	ent and registered office on file with the	6 JUN 26 AM II: 33 SECRETARY OF STATE ALLAHASSEE, FLORIG
	Intrastate Registered Agent C	Corporation	SSE SSE
	200 S. Orange Avenue, Sui	te 2600	E.F.
	Orlando, FL 32801		SEE 33
6. The name and (if changed):	d street address of the new registered agent  Craig Corbett	(if changed) and /or registered office	Þ
	912 Oakpoint Circle (P.O. Box NOT acceptable)		
	Apopka, FL 32712		
as changed will		-	-
Such change was authorized by the	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an office fied in writing of the change.	r so
//a (Signati	Les CHBIRMAN	Charles B. Turner, President (Printed or typed name and title)	<u> </u>
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statut ad I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	agree to act in this capacity, es relative to the proper and complete ation of my position as registered agen registered office address, I hereby conj	performance it. Or if this firm that the
	gnature of Registered Agent)	June 13, 2006	
If signing on be	chalf of an entity:		
(1	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)