P040001515/2

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RA Chans 01/21/09

COVER LETTER

Amendment Section Division of Corporations

TO:

WINAAR INTERNATIONAL GOOD			
SUBJECT: JUMAR INTERNATIONAL CORP (Name of Corporation)			
DOCUMENT NUMBER: P04000151512			
The enclosed Statement of Change of Registered Office/Agen	at and fee are submitted for filing.		
Please return all correspondence concerning this matter to the	following:		
JUAN E. ESTE	EVEZ		
JUAN E. ESTEVEZ (Name of Contact Person)			
JUMAR INTERNATIONAL CORP (Firm/Company)			
(1 mil/company	,		
8424 NW 66 STREET (Address)			
•			
MAIANAL EL S			
MIAMI, FL 33166 (City/State and Zip Code)			
For further information concerning this matter, please call:			
JUAN ESTEVEZ at (305) 593-0707		
(Name of Contact Person)	305) 593-0707 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of	f State.		
Mailing Address:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
F.O. BOX 0327	Citton Dununig		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of \underline{f} registered agent, or both, in the State of F	LORIDA
	the corporation: JUMAR INTE		
	office address: 8424 NW 66 S		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: <u>11/04/20</u> 6	04 Document number: <u>P04000</u>	151512
	d street address of the current regist rtment of State: (If resigned, enter r	tered agent and registered office on file wit resigned)	h the
	JUAN ESTEVEZ		99 SEC
	1890 NW 82 AVE SUITE 1	03	9 JAN
	DORAL, FL 33126		TAR IASS
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered offi	iza e 🔼
	JUAN ESTEVEZ		317
	8424 NW 66 STREET (P.O Box NOT ac	ceptable)	•
	MIAMI, FL 33166		
The street addre as changed will	ess of its registered office and the be identical.	street address of the business office of its	s registered agent,
Such change was	as authorized by resolution duly a be board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so
(Signatu	we of an officer or director)	JUAN ESTEVEZ - PR (Printed or typed name and to	ESIDENT (tite)
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept to no fited merely to reflect a chang beep novified in writing of this cl	ent and agree to act in this capacity. Ill statutes relative to the proper and com he obligation of my position as registered e in the registered office address, I hereb hange.	plete performance I agent. Or, if this y confirm that the
		11/10/08	
	nature of Registered Agent) half of an entity:	(Date)	
Т)	Typed or Printed Name)		

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *