P05000038020

(Re	equestor's Name)	
(Ad	ldress)	
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(Au	uiessj	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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SEGMINARY OF STATES

PA Change

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COVER LETTER

TO: Amendment Division of	Section Corporations							
SUBJECT:	Jamax Rea	ty, Inc.	····					
	. value of o	o,po.=						
DOCUMENT NUM	MER: P05	000038020						
The enclosed Statem	The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please return all corr	respondence concerning this matter	to the following:						
	Samuel A.	Houghton ntact Person						
-	Name of Co	ntact Person						
	Clark, Campbell, Mawh	innev & Lancaster, P.A	. .					
-	Firm/Ci							
	500 South Florida	Avenue, Suite 800						
•	Add	ress						
	Lakeland. F	lorida 3380 1						
-	City/State a	nd Zip Code						
	ah ay ahian @aan	softernove com						
shoughton@ccmattorneys.com E-mail address: (to be used for future annual report notification)								
I	E-mail address: (to be used for i	uture annuar report nour	ication)					
For further information concerning this matter, please call:								
	muel A. Houghton	at (<u>863</u>) Area Code & Daytin	647-5337					
Nam	e of Contact Person	Area Code & Daytir	ne Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.								
	Mailing Address:	Street Address:						
	Amendment Section	Amendment Se	ection					
	Division of Corporations	Division of Co	rporations					
	P.O. Box 6327	Clifton Buildir	-					
	Tallahasses FI 32314		e Center Circle					

Tallahassee, FL 32301

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, Flo ange is submitted for a corporation organized under the laws of the Stat er to change its registered office or registered agent, or both, in the Stat	e of Flori	da		
1. The name of t	the corporation: Jamax Realty, Inc.				
	office address: 500 South Florida Avenue, Suite 700				
3. The mailing a	address (if different): P.O. Box 490610, Lawrenceville, Georg	ia 30049			
4. Date of incom	poration/qualification: 3/14/2005 Document number:	P050	000380	20	
	d street address of the current registered agent and registered office on furtment of State: (If resigned, enter resigned)	ile with the	;		
	Hal A. Airth, Jr.				
	500 South Florida Avenue, Suite 800				
	Lakeland, Florida 33801		D 03	09	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or register	ed office	AHASS	OEC-2	Company of the Compan
	Samuel A. Houghton	·	79	2	191790
	500 South Florida Avenue, Suite 800		FI OF	AH 10: 31	C
	P.O. Box NOT acceptable Lakeland, Florida 33801	<u>_</u>		2	
The street address changed will	ress of its registered office and the street address of the business office lidentical.	e of its reg	sistered ag	zent,	
Such change wanthorized by t	vas authorized by resolution duly adopted by its board of directors or the corporation has been notified in writing of the chang	by an offi o	cer so		
Wha - V	What John Max Printed or typed Hair	well	T 00	こと・ 	0
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capaci to comply with the provisions of all statutes relative to the proper as nd I am familiar with and accept the obligation of my position as reg sing filed merely to reflect a change in the registered office address, as been notified in writing of this change.	ty. nd complet gistered ag I hereby co	e perform ent. Or i enfirm tha	ance f this t the	
	10/30/2	2009			
- 0	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)