P05000108697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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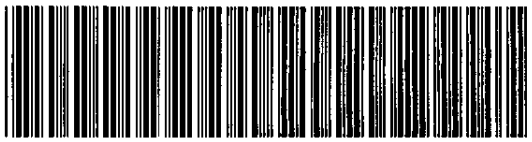

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12 FEB -3 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA 2-3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JLS Kids Corp.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jillian Smath
Name of Person

JLS Kids Corp/my Gym
Firm/Company

6504 N. State Road 7
Address

Coconut Creek, Fl 33073
City/State and Zip Code

mygymcoconutcreek@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jillian Smath at (954) 775-6771
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ $25 Filing Fee

☑ $55 Filing Fee & Certified Copy

INHS18 (5/08)

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2011

JILLIAN SMATH
JLS KIDS CORP.
6504 N. STATE ROAD 7
COCONUT CREEK, FL 33073

SUBJECT: JLS KIDS CORP.
Ref. Number: P05000108697

We have received your document for JLS KIDS CORP. and your check(s) totaling $55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE ABOVE ENTITY IS A FLORIDA CORPORATION, NOT A LIMITED LIABILITY COMPANY. THE FEE SUBMITTED WILL BE HELD PENDING THE CORRECTED DOCUMENT.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of $35.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 611A00024435

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JLS kids Corp
Name of Corporation

DOCUMENT NUMBER: P05000108697

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:

Jillian Smath
Name of Contact Person

JLS Kids Corp
Firm/Company

6504 N State Road 7
Address

Coconut Creek, FL 33073
City/State and Zip Code

mygymcoconutcreek@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jillian Smath at (954) 775-6771
Name of Contact Person — 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

CR2E045 (8/05)

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 _____ _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: JLS Kids Corp

2. The principal office address: 4647 University Drive
Coral Springs, FL 33067

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/4/05 Document number: P05000108697

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Lee J. Smith
JLS Kids Corp
4647 University Dr
Coral Springs, FL 33067

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Jillian Smith
JLS Kids Corp
6504 N. State Road 7
P.O. Box NOT acceptable
Coconut Creek, FL 33073

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TALLAHASSEE, FLORIDA

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.

Reg Agent Jillian Smith Jillian Smith
Signature of an officer or director + REGISTERED AGENT 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.

Lee A Bou
Signature of Registered Agent

_____
Date

If signing on behalf 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)