

PO8000092728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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TL
MAR 17 2015
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AJO BUSINESS ADMIN, INC.
Name of Corporation

DOCUMENT NUMBER: PO8000092728

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:

ANIBAL ORTIZ
Name of Contact Person

Firm/Company

5500 SW 8th ST
Address

PLANTATION, FL 33317
City/State and Zip Code

BORIMANO8@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANIBAL ORTIZ at (954) 600-0289
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 26, 2015

ANIBAL ORTIZ
5500 SW 8 ST
PLANTATION, FL 33317

SUBJECT: A J O BUSINESS ADMIN, INC
Ref. Number: P08000092728

We have received your document for A J O BUSINESS ADMIN, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 715A00004074

MADE CORRECTIONS
NECESSARY

RECEIVED
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE

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RECEIVED

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: AJO BUSINESS ADMIN
2. The principal office address: 5610 NW 49th AVE, TAMARAC, FL 33319
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/14/2008 Document number: 08000092728
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) _____

5610 NW 49th AVE
TAMARAC, FL 33319

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

5500 SW 8th ST
P.O. Box NOT acceptable
PLANTATION, FL, 33317

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED
AND
FILED

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]
Signature of an officer or director

ANIBAL ORTIZ PRES.
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

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