

P/1000030311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

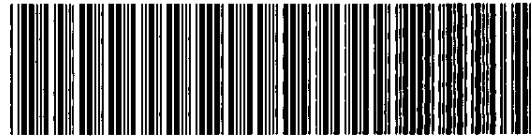
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
11 MAY 20 PM 12:16

R.A. Chorge
C.COULLETTE

MAY 25 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: J PEE SERVICE INC
Name of Corporation

DOCUMENT NUMBER: P11000030311

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:

JULIANA C-SANTOS
Name of Contact Person

J PEE SERVICE INC
Firm/Company

11613 GOODWYCK DR.
Address

ORLANDO FL 32837-
City/State and Zip Code

JPeeservice@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIANA C-SANTOS at (407) 406-7049
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
266 Executive Center Circle
Tallahassee, FL 32301

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.

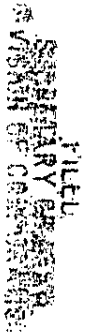
1. The name of the corporation: J PEE SERVICE INC
2. The principal office address: 11613 GOODWYCK DR ORLANDO-FL 32837
3. The mailing address (if different): 11613 GOODWYCK DR ORLANDO-FL 32837
4. Date of incorporation/qualification: 3/28/2011 Document number: P11000030311
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JULIANA C. SANTOS
11613 GOODWYCK DR
ORLANDO -FL 32837

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

JULIANA C. SANTOS
1767 BOKENEY DR
P.O. Box NOT acceptable
ORLANDO -FL 32837

11 MAY 20 PM 12:16



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.

Juliana C. Santos
Signature of an officer or director

JULIANA C. SANTOS
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.

Juliana C. Santos
Signature of Registered Agent

5-16-2011
Date

If signing on behalf of an entity:

JULIANA C. SANTOS
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