

P11000004 9306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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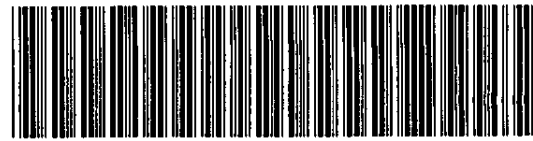
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

FEB 06 2012
T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Consulting by JSM Inc.
Name of Corporation

DOCUMENT NUMBER: P11000049306

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:

Robin Lindsay
Name of Contact Person

Consulting by JSM Inc.
Firm/Company

P.O. Box 2758
Address

Oneco, FL 34264
City/State and Zip Code

tkbj4@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Lindsay at (941) 962-1626
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

January 25, 2012

ROBIN LINDSAY
CONSULTING BY JSM INC
P O BOX 2758
ONECO, FL 34264

SUBJECT: CONSULTING BY JSM, INC.
Ref. Number: P11000049306

We have received your document for CONSULTING BY JSM, 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):

We need the original signature for Laura shearer.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 312A00001912

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TALLAHASSEE, FLORIDA

**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: Consulting by JSM, Inc.
2. The principal office address: 5205 26th Street W., Suite B
Bradenton, FL. 34207
3. The mailing address (if different): P.O. Box 2758
Oneco, FL. 34264
4. Date of incorporation/qualification: 05/24/2011 Document number: P11000049306
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)

Corporation Service Company
1201 Hays Street
Tallahassee, FL. 32301

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

Laura Shearer
5205 26th Street W., Suite B
(P.O. Box NOT acceptable)
Bradenton, FL. 34207

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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.

Robin L. Lindsay
(Signature of an officer or director)

Robin Lindsay, President
(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.

L G
(Signature of Registered Agent)

01/23/2012
(Date)

If signing on behalf of an entity:

Laura Shearer
(Typed or Printed Name)

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