## F13000002163

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<del></del>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TO ALANOWLEGGE SUFFICIENCY &FFILING

14 MIG-5 MI STATE

RARUCH8 10, 8. 6.14



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 244364)

AUTHORIZATION !

COST LIMIT : \$ 35.00

ORDER DATE: August 5, 2014

ORDER TIME : 12:16 PM

ORDER NO. : 244364-015

CUSTOMER NO: 7999718

CHANGE OF AGENT

NAME: GREAT JONES II INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

## **COVER LETTER**

Division of Corporations	
Great Jones II Inc.	
SUBJECT: Name of Corporation	n
DOCUMENT NUMBER: F13000002163	
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
Sandra Brown Sherman, Esq.	· ·
Name of Contact Person	on
Sherman Wells Sylvester & Stamelman LLP	
Firm/Company	
210 Park Avenue	
Address	<del></del>
Florham Park, NJ 07932	
City/State and Zip Coo	de
bkwok@shermanwells.com	
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this matter, please call:	•
Sandra Brown Sherman, Esq. 973	302-9716
Name of Contact Person at (	a Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of S	tate.
•	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO: Amendment Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	orporation organized under the laws of the State of Delaware		
in orde	r to change its registered	d office or registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: Great Jo	ones II Inc.		
2. The principal	office address:			
4117 Saltwa	ter Blvd, Tampa, Florida	a 33615	<del> · · ·</del>	
3. The mailing a	ddress (if different):			-
4. Date of incorp	oration/qualification: 0	Document number: F13000002163		
	street address of the cur tment of State: (If resign	rrent registered agent and registered office on file with the ned, enter resigned)		
	Corporation Service Co	ompany		
	1201 Hays Street			
	Tallahassee	FL 32301	\$ [kg 4	15, 15
6. The name and (if changed):	street address of the nev	w registered agent (if changed) and /or registered office	-5	
	Herb Goetschius	•	图图	
	4117 Saltwater Blvd		(1)	•
•	_	P.O. Box NOT acceptable		
	Tampa	FL 33615		
The street addre	ss of its registered office be identical.	ee and the street address of the business office of its registered age	ent,	
Such change was authorized by the	s authorized by resolution board or the corporati	on duly adopted by its board of directors or by an officer so ion has been notified in writing of the change.		
76	Southern	Herb Goetschius, President		
Signatur	e of an officer or director	Printed or typed name and title	_	
I further agree to performance of t	o comply with the provis my duties, and I am fam s document is being filed that the corporation has	istered agent and agree to act in this capacity. Is is ions of all statutes relative to the proper and complete Is ions of all statutes relative to the proper and complete Is iliar with and accept the obligation of my position as registered Is deen defice address, I Is been notified in writing of this change.		
By: Job	Enthelin	8/4/14	_	
Sign	ature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
Ту	ped or Printed Name	<del></del>		