# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: JOSE ZAMORA PRESIDENT 05/01/2013

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P02000021831

Entity Name: ZAMORA ENTERPRISES OF NORTH FLORIDA, INC.

# Current Principal Place of Business:

1816 ST JOHNS BLUFF RD #205 JACKSONVILLE, FL 32246

# **Current Mailing Address:**

2408 BALSAMWOOD CT ORANGE PARK, FL 32065

### FEI Number: 01-0617905

#### Name and Address of Current Registered Agent:

ZAMORA, JOSE L 2408 BALSAMWOOD CT ORANGE PARK, FL 32065 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

TitlePDSTNameZAMORA, JOSE LAddress2408 BALSAMWOOD CTCity-State-Zip:ORANGE PARK FL 32065

Date

FILED May 01, 2013 Secretary of State CC4019642879

Certificate of Status Desired: No

Date