F01000003887

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100128829311

05/09/08--01021--021 **35.00

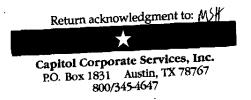
Z008 MAY -9 PM 2: 01
SECRETARY OF STATE

R.A. Change

TB 5-15-08

COVER LETTER

TO:	Amendment Section Division of Corporations								
SUBJI	CT:J.J.	KANE ASSOCI	ATES,	, INC.					
					•				
	MENT NUMBER: F01000								
The en	closed Statement of Change	of Registered Office	/Agent a	nd fee are submitte	ed for filing.				
Please	return all correspondence co	ncerning this matter	to the fo	llowing:					
Myra Homer (Name of Contact Person)									
		(Name of Con	tact Pers	on) 					
		Capitol Corporate	e Servic	es, Inc.					
		(Firm/Co	mpany)						
		800 Brazos,	Suite 4	00					
(Address)									
	Austin, Texas 78701								
		(City/State and	d Zip Co	de)					
For fur	ther information concerning	this matter, please ca	all:						
·	Myra Homer (Name of Contact P	erson)	_ at (800) rea Code & Daytin	345-4647 ne Telephone Number)				
	(-14	- ,	•	•	,				
Enclos	ed is a \$35.00 check made p	ayable to the Departr	nent of S	State.					
	Mailing A	ddress: ent Section		Street Address:					
		nt Section of Corporations		Amendment Secondivision of Corp					
	P.O. Box			Clifton Building					
		ee, FL 32314		2661 Executive					
				Tallahassee, FL	32301				



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

statement of cha	provisions of sections 607.0502, 617.0. ange is submitted for a corporation orgo er to change its registered office or regi	anized under the i	laws of the State of	New Jersey	_
1. The name of	the corporation:	J.J. KANE AS	SSOCIATES, I	NC.	
2. The principal	office address:		·····		
8008 US H	wy RT 130, Building One, Suite 214	, Delran, NJ 080	075		
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 7/24/2001	Documer	nt number: <u>F01000</u>	003887	
	d street address of the current registered rtment of State:	l agent and registe	ered office on file w	ith the	
	Price, Peggy				
	5719 E. Lake Fox Drive			_	
	Winter Haven, FL 33884			7 S. 28 S. 2	
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) a	and /or registered of	2008 MAY -9 SECRETARY TALLEHASS	FILE
	Capitol Corporate Services, Inc.			-EA B	
	155 Office Plaza Drive, Suite A		. <u></u>	FL017	
	(P.O. Box NOT acceptal			A STATE OF	
	Tallahassee	<u>Florida</u>	32301		
The street address changed will	ess of its registered office and the stre I be identical.	et address of the	business office of	its registered ag	ent,
Such change w authorized by t	as authorized by resolution duly adop he loard, or the corporation has been	ted by its board on notified in writin	of directors or by a ag of the change.	n officer so	
Senat	ure of an officer or director)	Josep	h Kane Printed or typed name and	d title)	
<i>U</i> -	t the appointment as registered agent of to comply with the provisions of all st and I am familiar with and accept the o ing filed merely to reflect a change in s been notified in writing of this chang				ance this the
Dular	ric Case, asst se	<i>C.</i>	5-5-08		
(Si	gnature of Registered Agent)		(Date)		_
If signing on be	ehalf of an entity:				
Delanie Case Ass	st. Secretary on Behalf of Capitol Comorate Se	ervices, Inc.			

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

(Typed or Printed Name)