Division of Corporations **Electronic Filing Cover Sheet**

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(((H180003513413)))



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To:

Division of Corporations

fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE J. REYNOLDS & CO., INC.

Certificate of Status	0
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COVER LETTER

TO: Amendment Section Division of Corporations

SURJECT: J. REYNOLDS & CO., INC.

Name of Corporation

DOCUMENT NUMBER: F0300000738

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:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Castillo

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

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

statement of chai	provisions of sections 607,0502, 617 nge is submitted for a corporation o to change its registered office or re	rganized under the la	ws of the State of	Texas
	he corporation: J. REYNOLI			
2. The principal	office address:			· · · · · · · · · · · · · · · · · · ·
3. The mailing ac	ddress (if different):			
4. Date of incorp	oration/qualification: 2/10/200	Document	number: F030	000000738
	street address of the current registe truent of State: (If resigned, enter resigned, enter resigned)	signed) ON SYSTE		with the
	PLANTATION		33324	_
6. The name and (if changed):	street address of the new registered	agent (if changed) an	d /or registered o	2018 DEC 11 SECRE ANA TALLANA
	Registered Agent Solution	ns, Inc.		
	155 Office Plaza Dr., Suit	e A		indess
	Tallahassee, FL 32301	NOT acceptable		AMII: 21
The street addre	ss of its registered office and the st be identical.	reet address of the bu	siness office of	its registered agent,
Such change was authorized by th	s authorized by resolution duly add e board, or the corporation has bee	pted by its board of c n notified in writing o	lirectors or by ar of the change.	officer so
151 Matthe	w Skipper e of an officer or director	Matthew	Skipper	President
I further agree to performance of t agent. Or, if this	the appointment as registered agen o comply with the provisions of all my duties, and I am familiar with a s document is being filed merely to that the corporation has been notifi	it and agree to act in statutes relative to th ind accept the ohligat reflect a change in th ied in writing of this c	this capacity, the proper and co- tion of my position the registered offi thange.	mplete on as registered
Sign	atign of Registered Agent	12/11/20	18 Date	
If signing on bel	//			
Justine Karn				
Ту	ped or Printed Name ** FILING	FEE: \$35.00 * * *		