Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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

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REGISTERED AGENT CHANGE JAY CONSTRUCTION MANAGEMENT, INC.

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Corporate Filing Menu

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(15)

COVER LETTER

TO: Amendment Section Division of Corporations	
JAY CONSTRUCTION MAI	NAGEMENT, INC.
SUBSECT.	Name of Corporation
DOCUMENT NUMBER: F110000029	56
The enclosed Statement of Change of F	tegistered Office/Agent and fee are submitted for filing.
Please return all correspondence conce	
KAYLA DAVIS	
<u> </u>	Name of Contact Person
CT CORPORATION	
	Firm/Company
2075 CENTRE POINT	E BLVD, SUITE 101
	Address
TALLAHASSEE, FL	32308
	City/State and Zip Code
bhershlaw@squnet	
E-mail address: (to	be used for future annual report nonfication)
For further information concerning this	•
KAYLA DAVIS	at (637-1628 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payab	le to the Department of State.
<u>Mailing Addre</u> Amendment S	ss: Street Address: oction Amendment Section
Division of Co	orporations Division of Corporations
P.O. Box 632	
Tallahassee, F	L 32314 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statut lange is submitted for a corporation organized under the laws of the State of <u>VERN</u> ler to change its registered office or registered agent, or both, in the State of Florid	THON	***
	f the corporation: JAY CONSTRUCTION MANAGEMENT, INC.		
2. The principa	al office address: 111 N.E. 1ST STREET. 4TH FLOOR, MIAMI FL 33132		
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification; 07/21/2011 Document number: F11000002956		
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	C	
	ARIEL QUIROS		
	111 N.B. IST STREET, 4TH FLOOR		ਨੀ
	MIAMI, PL 33132		01 AON 9
6. The name ar (if changed)	nd street address of the new registered agent (if changed) and /or registered office		
	C T Corporation System		AH 10:
	c/o C T Corporation System, 1200 South Pine Island Road		$\mathcal{C}_{\mathcal{I}}$
	P.O. Box NOT acceptable		
	Plantation, Florida 33324		
	ress of its registered office and the street address of the business office of its regi il be identical.		ent,
Such change v automized by	vas authorized by resolution duly adopted by its board of directors or by an office the board of the competation has been natified in writing of the change.	:E,\$0	
848	the or an oracle of these ways and the	ार _ा ह	7°4
I hereby accept I further agree performance of agent. Or, if to hereby confirm	of the apprintment as registered agent and agree to act in this capacity. In enfirity with the provisions of all statutes relative to the proper and complete if my malies, and I am familiar with and accept the obligation of my position as re his document is being filed merely to reflect a change in the registered office ada n that the corporation has been notified in writing of this change.	egistered iress, I	
	reporation System		
	granure of Registered Agent Date	11/9/2015 Dead	
If signing on b	ehalf of an entity:		
***	Typed or Printed Name		
	* * * PILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (03/12)