Electronic Filing Cover Sheet

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(((H24000192428 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500 Fax Number : (702)900-2290

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

Email Address: managedreports@incorp.com

REGISTERED AGENT CHANGE JAMJEM INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu

COVER LETTER

(((H24000192428 3)))

TO: Amendment Section Division of Corporations

SUBJECT: Jamjem Inc
Name of Corporation

DOCUMENT NUMBER: F13000004128

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:

Karen Gibson
Name of Contact Person
InCorp Services, Inc.
Firm/Company
9107 West Russell Road Suite 100
Address
Las Vegas, NV 89148-1233
City/State and Zip Code
managedreports@incorp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Gibson for InCorp Services, Inc. at (800) 246-2677

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13) (((H24000192428 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (((H24000192428 3)))

m orde	ange is submitted for a corporation over to change its registered office or re	•	
	the corporation: Jamjem Inc		<u></u>
2. The principal	office address. 360 MONTAUK H	WY, WAINSCOTT, NY 11975	
3. The mailing a	address (if different): PO BOX 217	3, AMAGANSETT. NY 11930	
	poration/qualification:09/23/2		
	d street address of the current register runent of State: (If resigned, enter res		with the
	MIRRAS, MICHAEL		
	5318 SW 22nd Pl		
	Cape Coral, FL 33914		20
6. The name and (if changed):	d street address of the new registered		
	InCorp Services, Inc.		is:
	3458 Lakeshore Drive		
	PC	3 Box NOT acceptable	- 5 - 6
	Tallahassee, FL 32312		· · · · · · · · · · · · · · · · · · ·
The street address changed will	ess of its registered office and the sti- be identical.	reet address of the business office o	f its registered agent,
, ,	as authorized by resolution duly ado ne board, or the corporation has been	pted by its board of directors or by n notified in writing of the change.	an officer so
illetter Ja	- May	James Mirras, Vice Presid	lent
Signahi	re of an officer or director	Fruited or typed name an	
I hereby accept I further agree of my duties, an document is be corporation has	the appointment as registered agent to comply with the provisions of all and familiar with and accept the ing filed merely to reflect a change is s been notified in writing of this cha.	t and agree to act in this capacity, statutes relative to the proper and c obligation of my position as registe in the registered office address, The nge.	complete performance red agent. Or, if this reby confirm that the
and to the	nature of Registered Agent	05/31/202	4
Sig	natuse of Registered Agent	Pate	
	half of an entity:		
Louise Broytenba	ch on behalf of InCorp Services, Inc.		
<u>j</u> .	yped or Frinted Name		

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