

F1800000 4591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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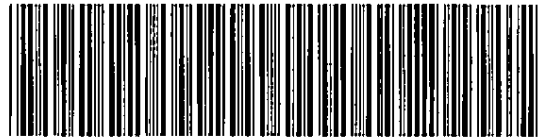
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Hand J Hospitality, Inc  
Name of Corporation

DOCUMENT NUMBER: F18000001591

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:

James Ciaschi  
Name of Contact Person

Hand J Hospitality  
Firm/Company

1638 E. Shore Dr.  
Address

Ithaca NY 14850  
City/State and Zip Code

admin@jhospitality.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Ciaschi at ( 607 ) 882-9609  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 21, 2019

JAMES CIASCHI  
1638 E. SHORE DR  
ITHACA, NY 04850

SUBJECT: H AND J HOSPITALITY, INC.  
Ref. Number: F18000004591

We have received your document for H AND J HOSPITALITY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 219A00003769

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SECRETARY OF STATE  
TALLAHASSEE, FL

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: H and J Hospitality, Inc  
2. The principal office address: 1638 E. Shore Dr  
Ithaca, NY 14850  
3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: 9/26/05 Document number: F18000004591

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

James Ciaschi  
1650 Arabian Lane  
Palm Harbor, FL 34685

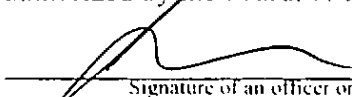
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

James Ciaschi  
7990 Citrus Park Town Center Blvd  
P.O. Box NOT acceptable  
Tampa, FL 33625

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

James Ciaschi  
\_\_\_\_\_  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
\_\_\_\_\_  
Signature of Registered Agent

2-14-19  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

James Ciaschi  
\_\_\_\_\_  
Typed or Printed Name