

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

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: (850)878-5926

REGISTERED AGENT CHANGE

JMG REALTY, INC.

Certificate of Status	0
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Corporate Filing Menu

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G. Goulitette APR 1 1 2008 4/10/2008

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

statement of o	hange is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Stat ion organized under the laws of the State of <u>Ge</u> or registered agent, or both, in the State of Flor	orgia	
	of the corporation: JMG Realty, Inc.		MIA.	
	al office address: 5605 Glenridge			
- 110m printerp	Atlanta, GA 30			
3. The mailing	address (if different):			
4. Date of inco	orporation/qualification: 6/10/199	7 Document number: F97000003	023	
	nd street address of the current reg artment of State:	gistered agent and registered office on file with t	he	
	Corporation Service Com	pany		
	1201 Hays Street		₹	
	Tallahassee, FL 32301-2	525	08 AF	2 000
6. The name ar (if changed)		ered agent (if changed) and /or registered office	08 APR 10 SECRETARY NLLAHASSE	
	CT Corporation System		E P	FT
	1200 South Pine Island		اران Si :	2
•	(P.O. Box NOT	acceptable)	ATI RIC	
	Plantation, FL 33324		DE →	
The street add, as changed wi	ress of its registered office and the identical.	he street address of the business office of its re	egistered agent,	
Such change v authorized by	vas authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an off been notified in writing of the change.	ficer so	
_2	SAT-	Thom Staten, Vice President		
(Signa I hereby accep I further agree of my duttes, a document is be corporation ha	sy the appointment as registered in the appointment as registered in the provisions of the comply with the provisions of the and familiar with and accepting filed merely to reflect a character of this been notified in writing of this	agent and agree to act in this capacity, fall statutes relative to the proper and cample t the obligation of my position as registered a nge in the registered office address, I hereby t change		
Ston	hasi / Sellen	4-10-08		
(S	ignature of Registered Agent)	(Date)	•	
II S SHOPP				
	ITA SOCIOTORY (Typed or Printed Name)			
	·- · · · · · · · · · · · · · · ·			

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)