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COVER LETTER

Division of Corporations
SUBJECT: TJL ENTERPLISES, INC. (Name of Corporation)
DOCUMENT NUMBER: F 98 00000 1508
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:
(Name of Contact Person)
ANDERSON -HEIDEL GRUSP, INC. (Firm/Company)
5824 Bee Ridge Rd. #287
SALASOTA, FL 34233 (City/State and Zip Code)
For further information concerning this matter, please call:
LYNN M. ANDENSON at (941) 809-653 / (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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

TO:

Amendment Section

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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TJL ENTERPLISES, INC.
1. The name of the corporation: TJL ENTERPHISES, INC. 2. The principal office address: 2820 OLD Moultwie Rd
54. Avgustine, FL 32086
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/17/98 Document number: F980000150
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Andreson- Hudel Group, Inc.
1199 TAILEVAST ROAD SULLE 105 28 8
SAKASOM, FLOLIDA 34243 ER S
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): ANDENS UN - Heidel Woup / nc 5824 Bee Ridge Ld. #287 (P.O. Box NOT acceptable) SAKAS OTA, FL 34233
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) (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) (Date)
If signing on behalf of an entity:
LYNN M. ANDONSON
(Typed or Printed Name)

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