

**Florida Department of State**  
Division of Corporations  
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((H11000149057 3)))



H110001490573ABC

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**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : CTPROCOMPLY  
Account Number : I20100000053  
Phone : (608) 827-5300  
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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  
JAL CHEMICAL CO., INC.**

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

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June 6, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JAL CHEMICAL CO., INC.  
PO BOX 616759  
ORLANDO, FL 32861

SUBJECT: JAL CHEMICAL CO., INC.  
REF: H09488

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

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Irene Albritton  
Regulatory Specialist II

FAX Aud. #: H11000145811  
Letter Number: 811A00013787

RECEIVED  
11 JUN -7 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

H110001470013

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: JAL CHEMICAL CO., INC.
2. The principal office address: 5615 Old Winter Garden Rd. Orlando, Florida 32811
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 6/26/1984 Document number: H09488
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)

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY  
FARMS ROAD PALM BEACH GARDENS, FL, 33410

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

C T Corporation System

1200 South Pine Island Road, Plantation, Florida 33324

P.O. Box NOT acceptable

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]  
Signature of an officer or director

John A. Tricoli III, President

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]

Signature of Registered Agent

31st day of May, 2011

Date

If signing on behalf of an entity:

Mark Williams, AVP

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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