M01000002837

Centers Of America Instant Tax Refund Service I South Main St., Suite 1430 Davton, Ohio 45402 (City/State/Zip/Phone #)
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.			
1. The name of the limited liability company is: Jax Centers of Buero	ca, LL	۷	<u>_·</u>
2. The mailing address of the limited liability company is: 1 South Main	. str.	ead	•
Suite 1430, Daytor, OH 45402			•
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12/01 MO/000028. 3. Date of filing/registration in Florida 4. Document number		- , 	—
5. The name of the registered agent and the registered office address as shown on the Florida Department of State:	records o	f the	
Dun Neal	•	·	
Mame 469 B Alafaya Woods Blod	F	4.0	
469 B Alafaya Woods Blod Address Oviedo FL 32706 City, State and Zip		JAN I	Π
6. The name and address of the new registered agent and/or office:	iý h ja	ω ; 	
Ferum Oakazina	20	AM 10: 39	
Fesum Ogbazion Name		33	
1010 DUNN BVe Florida street address (P.O. Box NOT acceptable)	ا الحقد إلى	. —	
•			
Sack sawale FL 32218 City, State and Zip	*		
If the limited liability company is not organized under the laws of the State of Florida confirmed that after the change or changes are made, the Florida street address of the and the business office of the registered agent will be identical. Or, in the case of a F liability company, it is hereby confirmed that the change(s) was/were authorized by a the plembers of the limited liability company or as otherwise provided in the articles the operating organization of the limited liability company.	registered lorida lim n affirmat of organiz	1 affina	e of
(Signature of a member or authorized epresontative of a member) ARECISTERD ARE	11+		
Pesum Ogha 7:00 (Printed or typed name of signee)	,		
I hereby accept the appointment as registered agent and agree to act in this capacity comply with the provisions of all statutes relative to the proper and complete perform and I am familiar with and accept the obligations of my position as registered agent Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the address, I hereby confirm that the limited liability company has been notified in write	. I furthe nance of n as provide e registere ing of this	r agree ny duties ed for in ed office change	to s, ?
(Signature of Registered Agent)			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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