NIOUUUU1503

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PICK-UP WAIT	MAIL
(Business Entity Name)	<u> </u>
(Document Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations		<u>,</u> .
SUBJECT: Janpa Jaz	Name of Corporat	corporated spons
DOCUMENT NUMBER: NZC	00000750	23 5
The enclosed Statement of Change		~
Please return all correspondence co	ncerning this matter to the	following:
Dominic	Walker	
_	Name of Contact Pe	erson
	Firm/Company	
3026	9 USF Ho	My Drive
Tampe	F/ 33	620
Somin	alk a amail	l.com
h-mail address	; (to be used for future a	nnual report notification)
For further information concerning	this matter, please call:	
(21)		801 548-7723
Name of Contact Pe	rson at (_	80 5 48 - 1225 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made pa	iyable to the Department (of State.
Mailing Ac Amendnie	idress:	Street Address:
11	nt Section of Corporations	Amendment Section Division of Corporations
P.O. Box		Clifton Building
	e, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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

	ls 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this		
	a corporation organized under the laws of the State of		
in order to change its regis	lered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: 1			
2. The principal office address: <u>3</u>	269 USF Holly trive		
Tampa, FL	3620		
3. The mailing address (if different)			
4. Date of incorporation/qualification	11: 8-9-2010 Document number: N 1 0000007503		
5. The name and street address of the Florida Department of State: (If re-	ll e current registered agent and registered office on file with the signed, enter resigned)		
Gary - 1	Vorthley - Resigned		
474	O Everhent DR		
Land C	Lakes, FL 34639		
6. The name and street address of th (if changed):	e new registered agent (if changed) and /or registered office		
Dominic	1 1 1 1 1 in the state of the s		
61/3 M	P.O. Box NOT acceptable		
Tompa,	FL 33617		
as changed will be identical.	office and the street address of the business office of its registered agent.		
Such change was authorized by resauthorized by the board, of the co	Olution duly adopted by its board of directors or by an officer so obstation has been notified in writing of the change.		
Signature of an officer or director	Dominic Walker - Treasurer		
I further agree to comply with the performance of my duties, and I am again. On it this document is bein	registered agent and agree to act in this capacity. Provisions of all statutes relative to the proper and complete Ifamiliar with and accept the obligation of my position as registered If filed merely to reflect a change in the registered office address. I It has been notified in writing of this change.		
may Wall	8.30-17		
Spatiure of Registered Agen If signing on behalf of an entity:	12400		
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 (03/12)