

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



06/24/15--61008--012 +-350

**FILED** 2019 JUN 24 AM 10: 42 SECINE VALVE OF STATE TALLAHASSEE, FL

JUL - 5 2019 C Kinse

# COVER LETTER

#### TO: Amendment Section Division of Corporations

# Friends of Jacksonville Beach Elementary, Inc.

SUBJECT:\_

Name of Corporation

# N12000004345

### DOCUMENT NUMBER:

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:

# Jaime Shachter

Name of Contact Person

Friends of Jacksonville Beach Elementary. Inc.

Firm/Company

315 S 10th Street

Address

Jacksonville Beach FL 32250

City/State and Zip Code

FOJBEPTOPresident@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaime Shachter	904	699-6963
	at (	
Name of Contact Person	Area Code	& Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>'4ailing Address:</u> 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

CR2E045 (03/12)

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.

Friends of Jacksonville Beach Elementary. Inc.
--

1.	The name of the corporation:		
		315 S 10th Street, Jacksonville Beach FL 32250	
2.	The principal office address:	, 	

3. The mailing address (if different):\_\_\_\_\_\_

4. Date of incorporation/qualification: \_\_\_\_\_\_ Document number: \_\_\_\_\_\_ Document number:

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)

	Valerie Gregg	S	2019	
	315 S 10th Street		9 JUN	. Li
	Jacksonville Beach FL 32250	AHAS	124	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered	SEGEFL	AM 10: 42	
	Jaime Shachter	171		

315 S 10th Street

P.O. Box, NOF acceptable

Jacksonville Beach FL 32250

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.

Jaime Shachter, 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.

If signing on behalf of an entity:

06/21/2019

Date

Eyped 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 CD2D015 02712