(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

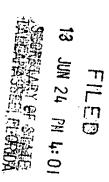
Office Use Only



900248400109

06/24/13--01007--016 **35.00

R. WHITE



TO:

Amendment Section

COVER LETTER

Division of Corporations
SUBJECT: HENS IN JAX INC. Name of Corporation
DOCUMENT NUMBER: N120000 10 236
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:
Lauren Tran Name of Contact Person
Firm/Company
3680 Rustic LN.
Jacksonville, FL 32217 City/State and Zip Code
Tacksouville, FL 32217 City/State and Zip Code hens in jax a gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

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

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: HENS IN JAX, INC
2. The principal office address: 10 37 WILCOX St.
Jacksonville, FL 32204
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/26/2012 Document number: N12000/0236
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)
Robert H. Davis
1037 Wilcox St.
JACKSON VIlle, FL
6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed):
LAUREN TRAD
3680 Kustic LN. P.O. Box NOT acceptable
JACKSONVIlle, FL 32217
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.
Lauren Trad, agent
Signature of an officer or director Printed or typed name and title I have been accounted as a registered again and agree to get in this garagett.
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 adduntent is being filed merely to reflect a change in the registered office address, I hereby complying that the corporation has been notified in writing of this change.
Signature of Registers Agent 6/21/2013 Date
If signing on behalf of an entity:
Hens In Jax Inc. Typed or Printed Name

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