## N150000003042

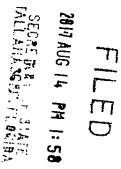
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## **COVER LETTER**

Division of Corporations

SUBJECT: JAX TRAILBLAZERS, INC.

Name of Corporation

DOCUMENT NUMBER: N15000003042

Amendment Section

TO:

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:

**JB ROTH** 

Name of Contact Person

ROTH LAW FIRM PL

Firm/Company

6100 GREENLAND RD., STE 604

Address

JACKSONVILLE, FL 32258

City/State and Zip Code

JB@ROTHLAWFIRM.NET

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

For further information concerning this matter, please call:

JB ROTH \_\_\_\_\_904 \\_595-7900

Name of Contact Person Area Code & Daytime Telephone Number

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

statement of change is submitted for a corporation of in order to change its registered office or r	organized under the laws	of the State of FLOI	RIDA
1. The name of the corporation: JAX TRAILBL	AZERS, INC.		
2. The principal office address: 8702 PERIME	TER PARK BLVD.	, JACKSONVIL	LE, FL 32216
3. The mailing address (if different):			
4. Date of incorporation/qualification: 03/25/20	15 Document nu	mber: N150000	03042
5. The name and street address of the current register. Florida Department of State: (If resigned, enter re		office on file with th	ne
ROTH LAW FIRM PL			
234 CANAL BLVD., SUIT	E 2	LVT.	<b>8</b>
PONTE VEDRA BEACH,	FL 32082	* 注 完 要 是	
6. The name and street address of the new registered (if changed):	d agent (if changed) and /	or registered office	FILED
6100 GREENLAND RD.,	SUITE 604		<b>G</b>
JACKSONVILLE, FL 325	x NOT acceptable	_	
The street address of its registered office and the s as changed will be identical.	treet address of the busin		
Such change was authorized by resolution duly ad- authorized by the board, or the corporation has been	opted by its board of dire on notified in writing of	ectors or by an offic the change.	er so
James James	JAMIE SEIM, PRESIDENT		
I hereby accept the appointment as registered ages I further agree to comply with the provisions of all performance of my duties, and I am familiar with a agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notif	nt and agree to act in the l statutes relative to the j and accept the obligation o reflect a change in the	proper and complete n of my position as r registered office ad	registered
	07/27/2017		
Signature of Registered Agent	<del></del>	Date	
If signing on behalf of an entity:			
JEAN B. ROTH Typed or Printed Name			

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

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