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| P.O. BOX-20811  BRADENTON, FL 3420L                         |   | 204   | 200005855032 6<br>-06/19/0201018009<br>******35.80 ******35.80 |
|   |   |   | Office Use Only  |
| CORPORATION NAME  | (S) & DOCUM                                       | ENT NUMBER(S), (i   | f known):  |
|   |   |   | Ö  |
| 1. (Corporation   | Name)   | = (Document #)  | NSEC<br>02   |
| 7   |   |   | JUN ORF T  |
| (Corporation  | Name)   | (Document #)  | 19 COR OF THE COR OF THE COR                                   |
| 3   | \T  | (Document #)  | PA 3   |
| (Corporation  | Name)   | (Dodanism n)  | 15 Hope  |
| 4. (Corporation   | Name)   | (Document #)  |  |
|   | Pick up time                                      |   | Certified Copy   |
|   | Will wait   | Photocopy   | Certificate of Status  |
| Wildir Out  | , , <del>, , , , , , , , , , , , , , , , , </del> |   |  |
| NEW FILINGS   |   | AMENDMENTS  | effect -<br>   |
| Profit Not for Profit Limited Liability Domestication Other |   | Amendment Resignation of Change of Regi Dissolution/Wi Merger | R.A., Officer/Director<br>istered Agent<br>thdrawal            |
|   |   | REGISTRATION  | <u>QUALIFICATION</u>   |
| OTHER FILINGS   | = =   |   |  |
| OTHER FILINGS  ☐ Annual Report ☐ Fictitious Name            |   | Foreign Limited Partner Reinstatement Trademark Other         | rship RA address Chg   |

## 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, the undersigned corporation organized under the laws of the State of Flovida   |
|--|
| submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.  |
| 1. The name of the corporation: C • J. M. INC.   |
|  |
| 2. The mailing address of the corporation: CoJ.M. INC. P.O. BOX 208  BRADENTON, FL 34204   |
| 3. Date of incorporation/qualification: 01-10-2001 Document number: Polo0000 480   |
| 4. The name and address of the current registered agent and office:  |
| CAPOLYN J MANTONE  |
| 11210 PARKSIDE PLACE   |
| 2200501501 (1 2050   |
| 5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)  |
| 6214 WARBLER LANE  |
| BRADENTON, FL 34202  |
| 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.   |
| The Carolis Matas  |
| (Signature of an officer, chairman or vice chairman of the board) (Date)   |
| arolyn Myton Vice chairman of the board _  |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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. |
| t See above  |
| (Signature of Registered Agent) (Date)  If signing on behalf of an entity:   |
| (Typed or Printed Name) (Capacity)   |
| (Capacity)   |
| * * * FILING FEE: \$35.00 * * *  |

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