## P02000020492

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	<i>⊋#</i> )
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



100023190761

09/24/03--01054<del>--</del>001 \*\*35.00

D3 SEP 24 PH 12: 56

e/A cha. Mm 9/29/03

## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: JEDD GROUP, INC. (Name of corporation)
· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: 41- ZOZ 87/8
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:
ISTELA LAMIS
ESTELA PAMIS (Name of person)
JEDD GROUP, INC. (Name of tirm/company)
13850 Sw 78 St - (Address)
HIAMI, FL 33/75 (City/state and zip code)
For further information concerning this matter, please call:
ESTELA RAMIS at (305) 5251841 (Name of person) (Area code & daytime telephone number)
× Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

مورنس

in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: JEDD GROUP, INC.  2. The principal office address: 13850 SW, 18th STAGET
1. The name of the corporation: JEDD GROVP, INC.
The state of the s
2. The principal office address. 150 30 200; 10 210001
MIMI, E 33175
13/0
3. The mailing address (if different): N/4
2/22/2
4. Date of incorporation/qualification: $\frac{2/22/02}{}$ Document number: $\frac{41-2028718}{}$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State;
* ESTELA PAEZ - PRESIDENT
13850 SW 18th SMEN - 9
MIANI, TO 33175  6. The name and street address of the new registered agent (if changed) and /or registered office TF 2
changed):
* ESTELA RAHIS - PRESIDONT
changed): # ESTELA RAHIS - PRESIPONT FOR THE TOP TO THE
MIANI IE 33175
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.
(Signature of an officer, ghairman or vice chairman of the board) X ESTEL Mamis Vorsitles of (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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Estela Ramis President
(Typed or Printed Name) (Capacity)  *** FILING FEE: \$35.00 ***

Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314