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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Jumis for Joy, Inc. (Name of corporation) DOCUMENT NUMBER: PO2 0000 64500
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:
Sondra D. Everson (Name of person)
Name of firm/company)
7340 NW 35 th Ct. (Address)
Lauderhill, FL 33319. (City/state and zip code)
For further information concerning this matter, please call:
Son dra D. Everson at (954) 747-6878 (Name of 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 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the p	rovisions of se	ctions 607.0.	502, 617.0502	2, 607.150	8, or 617.13	08, Florida	i Statutes
this statement of c							
Florida	-		egistered offi		· ·		
of Florida.		_		7.49	1	•,	
1. The name of the	corporation:	Jumps	for Ja	y, 1	NC.		<u> </u>
2. The principal of	fice address:	9203	Edgeme	ν / -	-que		
			Rator			4	
3. The mailing add	lress (if differer	nt): <u>734</u>	O NW	35	CT		
			leghill			<i>î</i>	****
4. Date of incorpor	ration/qualificat	tion: <u>6/1/</u>	102	Docum	ent number:	Po 2 800	,236 45°
5. The name and st		r ,	ŧ			ریمہ طلا ایکا س ا	the -
Florida Departm						SSE	+ [
	Lawr	ence	T. Ad	elman		m m m	₹ [
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	Corgi	SPRING	5 10		06/		**
6. The name and	street address o	of the new re	gistered agen	t (if chan	ged) and /or	registered	office (if
changed):	50	Ndic	D	Everse	N		<i>7</i>
	7340	Mi	35-14 onal mailbox NOT a	(0.	7	·	
	7 2 7 0	(P.O. Box or perso	onal mailbox NOT	acceptable)		· · •	÷
	Lauder	hill,	FC 3	3319		<u> </u>	•
The street address agent, as changed v	of its registered will be identica	d office and t	he street addr	ess of the	business off	fice of its re	gistered
Such change was a authorized by the b	uthorized by re poard, or the co	esolution dul rporation has	y adopted by : s been notifie	its board o d in writin	of directors o	or by an offi nge.	cer so
Signature of an officer, cha	irman or vice chairma	n of the board)	KEN	(Printed or	typed name and til	dent	•
I hereby accept the	appointment a	is registered	agent and ag	ree to act	in this capa	citv.	nta
l further agrée to c performance of my registered agent. (office address, I he)r, if this docui	ment is being	filed merely	to reflect	a change in	the register	ed
Sandia	D. Euce			12/1	102		
(Signat	ure of Registered Ager	nt)	· ·		(Date)		
f signing on behalf of			/	/		,	
Sowdra (Typed	Or Printed Name)	or		299/	(Capacity)	<u> </u>	 .
(1 yped	or comentanite)				(Capacity)		

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