

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000125700

Entity Name: JAYJOS, INC.

FILED
Oct 06, 2008
Secretary of State

Current Principal Place of Business:

15205 NW CR 274
ALTHA, FL 32421 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 126
ALTHA, FL 32421 US

New Mailing Address:

FEI Number: 33-1033018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, LEANNA S
25676 NE EVANS STREET
ALTHA, FL 32421 US

Name and Address of New Registered Agent:

HALL, LEANNA S
26200 NW JAYJOS LN
ALTHA, FL 32421 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LEANNA HALL

10/06/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, T () Delete
Name: HALL, JEROME R
Address: PO BOX 568
City-St-Zip: ALTHA, FL 32421 US

Title: VP, S () Delete
Name: HALL, LEANNA S
Address: PO BOX 568
City-St-Zip: ALTHA, FL 32421 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEANNA HALL

VP

10/06/2008

Electronic Signature of Signing Officer or Director

Date