## PO2000127582

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
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09 MAY 14 AN 11: 43

SECRETARY OF STATE
TALLAHASSEE FLORIDA



## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Grant and Grant Rea Name of Co		<del></del>					
DOCUMENT NUMBI	ER: P020	000127582						
	of Change of Registered Office	/Agent and fee are submit	ted for filing.					
Please return all corresp	ondence concerning this matter	to the following:						
	Anita B	urney						
Name of Contact Person								
Grant and Grant Realty of Jax, Inc.								
Firm/Company								
1616 Jork Road STE #301								
Address								
laskasavilla El 22207								
Jacksonville, FL 32207  City/State and Zip Code								
	·	•						
agbumey@aol.com								
E-mail address: (to be used for future annual report notification)								
For further information	concerning this matter, please ca	all:						
Λ.,	ita Burnay	004	705 0505					
	ita Burney Contact Person	at ( 904 ) Area Code & Daytir	ne Telephone Number					
i valito ox	·							
Enclosed is a \$35.00 che	eck made payable to the Departr	ment of State.						
ΊΖ	ng	C4 4 4 3 3						
V	Mailing Address: Amendment Section	Street Address: Amendment Se	ction					
	Division of Corporations	Division of Co						
	P.O. Box 6327	Clifton Buildin	g					
	Tallahassee, FL 32314	2661 Executive						
		Tallahassee, FI	L <b>323</b> 01					

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

statement of cha	provisions of sections 607.0502, 6 ange is submitted for a corporation er to change its registered office or	n organized u	ınder the laws of the	State of Flo	rida		
1. The name of	the corporation: Grant and G	Grant real	ty of Jax, Inc.				
2. The principal	office address: 1616 Jork Roa	d STE #30	01			<del>-</del>	
Jacksonvi	lle, FL 32207						
3. The mailing a	address (if different):		····				
Same as	s above	<u> </u>				<del></del>	
4. Date of incor	poration/qualification:		Document number:	P02	000127	582	
	d street address of the current regist rtment of State: (If resigned, enter r		nd registered office	on file with th	ne		
	Anita Burney						
	4741 Atlantic Blvd. STE E-	-4					
	Jacksonville, FL 32207				<del></del>		
6. The name and (if changed):	d street address of the new registere				SECRETAL ALLAHAS	NAY 60	77
	Anita Burney				SEE SY C	4	M
	1616 Jork Road STE #301	Ī			FLC	≩	0
	P.O. I	Box NOT accept	able	<del></del>	TAT PRIC		
	Jacksonville, FL 32207				Þra 6	27	
_	ess of its registered office and the be identical.					igent,	,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has be	adopted by it been notified	is board of directors in writing of the cl	s or by an offi hange.	icer so		
anta	Burney President		In the Bur	3	esidei	1	-
I hereby accept I further agree of of my duties, an document is bei corporation has	the appointment as registered ag to comply with the provisions of a ad I am familiar with and accept to ing filed merely to reflect a chang s been notified in writing of this c	gent and agr all statutes r the obligatio ge in the regi hange.	ee to act in this cap elative to the prope n of my position as stered office addre.	pacity. or and comple registered ag ss, I hereby co	te perfori gent. Or, onfirm th	nance if thi. at the	e s ?
Wang.	nature of Registered Agent		May 1/Da	2-009 tc			
If signing on be	half of an entity:						
Warz	a birkNey Q i	-					
	* * * EII IN	NC FFF. \$3	15 AA * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)