P0300	0017695
(Requestor's Name) (Address)	700252759297
(Address) (City/State/Zip/Phone #)	PA 2009 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	FILED 2013 OCT 23 PH 12: SEORE WARD OF STA FALLAHASSEE, FLOO
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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: Jones Homes USA, Inc.

Name of Corporation

DOCUMENT NUMBER: p03000017695

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:

Mary Walsh	ntact Person	
Emerson Interna	tional, I	nc.
370 CenterPointe	• •	uite 1136
Altamonte Spring		32701
City/State an mwalsh@emerso E-mail address: (to be used for fu	n-us.co	
For further information concerning this matter, please c	-	
Mary Walsh	_{at (} 407	332-4480 & Daytime Telephone Number
Name of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department	ment of State.	
Mailing Address: Amendment Section	Amen	Address: iment Section
Division of Corporations P.O. Box 6327		bn of Corporations Building
Tallahassee, FL 32314		Executive Center Circle
	Tallah	assee, FL 32301

CR2E045 (03/12)

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 \$17.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Jones Homes USA, Inc. 2. The principal office address: 370 CenterPointe Circle Suite 1136 Altamonte Springs, FL 32701

3. The mailing address (if different):

4. Date of incorporation/q	ualification: 2/13/2003	Document number;	o03000017	695

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

	Kathryn Smith - resigned			2813	
				13 OC	
			LANS ANS	:123	FIL
6. The name and (if changed):	street address of the new registered agent (if changed) an	d /or registere	d officer LO	PH	EU
	Mary Walsh		RIDA	06	۱.
	370 CenterPointe Circle Suite 1136		/		
	P.O. Box NOT acceptable Altamonte Springs, FL 32701				

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.

or director

Jonathan Claber, Director 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.

man woosh.	10/08/201	3	
Signature of Registered Agent		Date	
If signing on behalf of an entity:			
Mary Walsh			
Typed or Printed Name			
	* * * FILING FEE: \$35.00 * * *		
MAKE CHECK	S DAVABLE TO FLORIDA DEPARTM	FNT OF STATE	

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)