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COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: Chadd Jaffy Construction, Inc. (Name of Corporation) | | | | | |
| DOCUMENT NUMBER: P03000142349 | | | | | |
| 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: | | | | | |
| Chadd Jaffy (Name of Contact Person) | | | | | |
| Chadd Jaffy Construction, Inc. (Firm/Company) | | | | | |
| 6184 Royal Lytham Drive (Address) | | | | | |
| Boca Raton, Florida 33433 | | | | | |
| (City/State and Zip Code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Chadd Jaffy at (561) 703-4713 (Name of Contact 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 Clifton Building 2661 Executive Center Circle | | | | | |

Tallahassee, FL 32301

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

| statement of chang | rovisions of sections 607.0502, 617.0502, 607. ge is submitted for a corporation organized w to change its registered office or registered as | nder the laws of the State of $\underline{\hspace{1.5cm}}$ | florida |
|--------------------------------------|--|--|---|
| | e corporation: Chadd Jaffy Construction, | - | |
| • | ffice address: 6184 Royal Lytham Drive | | |
| • | dress (if different): | | |
| 4. Date of incorpo | oration/qualification: 12/1/03 | Document number: P63 | 000142349 |
| 5. The name and s Florida Departn | street address of the current registered agent arment of State: | nd registered office on file with | |
| (| Chadd Jaffy | | ASS = |
| <u>-</u> | 6595C Park View Drive | | SEP E I |
| E | Boca Raton, Florida 33433 | | 9: 05 STATE |
| 6. The name and s (if changed): | street address of the new registered agent (if ch | hanged) and /or registered offi- | |
| <u>(</u> | Chadd Jaffy | | |
| <u>(</u> | 6184 Royal Lytham Drive | | |
| <u>[</u> | (P.O. Box NOT acceptable) Boca Raton, Florida 33433 | | |
| The street address as changed will b | s of its registered office and the street addresse identical. | ss of the business office of its | registered agent, |
| | authorized by resolution duly adopted by it board, or the corporation has been notified | | |
| • • | Ch | add Jaffy, President (Printed or typed name and to | tic) |
| I hereby accept th | he appointment as registered agent and agre comply with the provisions of all statutes re I am familiar with and accept the obligation g filed merely to reflect a change in the regi been notified in writing of this change. | ee to act in this capacity. elative to the proper and com n of my position as registered stered office address, I hereb | plete performance l agent. Or, if this y confirm that the |
| Chr | ell Mh De | ecember 6, 2006 | |
| (Sign | nature of Restered Agent) | (Date) | |
| If signing on beha | alf of an entity: | | |
| Chadd Jaffy | ped or Printed Name) | | |
| (1)/ | * * * FILING FEE: \$3 | 35.00 * * * | |

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)