P04000/44257

(Re	questor's Name)	
(Ad	dress)	·
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(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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08/12/09--01010--012 **125.00

08/25/09--01002--009 **20.00

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1A Change Newis 8.25.09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JOP BUILDERS, MC Name of Corporation
DOCUMENT NUMBER: <u>P04000144257</u>
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:
James Peterson
Name of Contact Person
JDP BUILDERS; INC
232 Kono Way Address
DEST N FL 3254/ City/State and/Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: James Peterson at (850 837 - 9838 Name of Contact Person Area Code & Daytime Telephone Number Name of Contact Person Name of
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



August 17, 2009

JDP BUILDERS, INC 232 KONO WAY DESTIN, FL 32541

SUBJECT: JDP BUILDERS, INC Ref. Number: P04000144257

We have received your document for JDP BUILDERS, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida-eorporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 409A00027851

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this are submitted for a corporation organized under the laws of the State of	
•	to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	ne corporation: TOP BUILDERS, INC	
2. The principal of	office address: 232 Kono wax	
	DESTIN, FL 3254/	
3. The mailing ac	ddress (if different):	
4. Date of incorp	oration/qualification: 10/19/04 Document number: P040000/4425	<u>-</u> 2
5. The name and	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)	
	Resigned	
•		
	AHA	1
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	··
	James Peterson For I	•
•	232 / 56	
	P.O. Box NOT acceptable	
	Destin, FL 32541	
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
Signature	Tames Peterson e of an officer or director Printed or typed name and title	
I hereby accept if further agree to of my duties, and document is being corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
Sign	lesson Mature of Registered Agent 8/21/09 Date	
If signing on bel	half of an entity:	
_JAMes		
	ped or Printed Name	

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