

PO4000085782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2017 MAY -1 AM 9:10

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

*Spach*

MAY 19 2017

WHITE

17 MAY 19 PM 2:06



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 2, 2017

BRIANNE INMAN  
2025 SW COLLEGE RD  
OCALA, FL 34471

SUBJECT: DJ PROPERTY INVESTMENTS, INC.  
Ref. Number: P04000085782

We have received your document for DJ PROPERTY INVESTMENTS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

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) 245-6050.

Carol Mustain  
Regulatory Specialist II

Letter Number: 517A00008599

RECEIVED  
17 MAY 18 AM 9:57  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DJ Property Investments, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P04000085782

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:

Brianne Inman  
Name of Contact Person

DJ Property Investments, Inc  
Firm/Company

2025 SW College Rd  
Address

Ocala, FL, 34471  
City/State and Zip Code

binman@jenkinscarson  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brianne Inman at (352) 867-1800  
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DS Property Investments, Inc  
2. The principal office address: 2025 SW College Rd  
Ocala, FL, 34471  
3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: 6/1/4 Document number: P04000085782

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)


Mark Ornstein  
2 S Orange Ave  
Orlando, FL, 32801

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Mark Ornstein  
2822 Remington Green Circle  
P.O. Box NOT acceptable  
Tallahassee, FL, 32308

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.

  
Signature of an officer or director

Donald Jenkins MOR-Owner  
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.*

\_\_\_\_\_  
Signature of Registered Agent

\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)