(Red	questor's Name)	
, (Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(⊅∞	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
		The

Office Use Only

2017 MAY - 1 AM 9: 18



500298522465

05/02/17--01002--017 **25.00

05/24/17--01022--007 **10.00

MAY 2 4 2017 D CONNELL



May 2, 2017

BRIANNE INMAN 2025 SW COLLEGE RD OCALA, FL 34471

SUBJECT: DRJ INVESTMENTS, INC.

Ref. Number: P04000085787

We have received your document for DRJ 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 Begulatory Specialist II

Letter Number: 217A00008599

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DRJ IN VESTMENT INC Name of Corporation		
DOCUMENT NUMBER: P04000085787		
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:		
Branne Lnman Name of Contact Person		
DRJ INVESTMENTS INC		
avas SW College Rd Address		
Ocala El 34471 City/State and Zip Code		
E-mail address: (to be used for folure annual report notification)		
For further information concerning this matter, please call:		
Stlanne Luman Name of Contact Person at (38a) \$47-1800 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State		

Mailing Address: Amendment Section

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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DRJ INVESTMENTS, INC
2. The principal office address: 2025 SW College Rd
Dcala, FC, 34471
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/1/4 Document number: P040008(787
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 omstein
25 Drange Ave
Driando, FL, 32801
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
2.822 Reminoton Green Cucce 32 3
Iallahassee, PL, 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 Abroad Jenkins Mak-auner 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:
Toward or Brittant Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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