

PD4000109215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

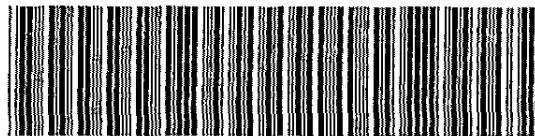
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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Just Labor  
(Name of Corporation)

**DOCUMENT NUMBER:** P 04 000 109215

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEBORAH STEELE  
(Name of Person)

Just Labor, Inc  
(Name of Firm/Company)

629 N 12th ST  
(Address)

TAMPA FL 33602  
(City/State and Zip Code)

For further information concerning this matter, please call:

DEBI STEELE at (813) 221-7301  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Just Labor Inc.
2. The principal office address: 7518 Malta Ave TAMPA FL 33637
3. The mailing address (if different): 629 N 12th St, TAMPA FL 33602
4. Date of incorporation/qualification: 7/23/04 Document number: P04000109215
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Julie A Latta  
629 N 12th St  
TAMPA FL 33602

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

Deborah L. Steele  
629 N 12th St  
(P.O. Box NOT acceptable)  
TAMPA FL 33602

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.

Deborah Steele  
(Signature of an officer or director)

DEBORAH STEELE  
(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.

Deborah Steele  
(Signature of Registered Agent)

12/6/04  
(Date)

If signing on behalf of an entity:

DEBORAH STEELE  
(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

FILED  
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CLERK OF STATE  
TALLAHASSEE, FLORIDA