

PD 4000116900

(Requestor's Name)

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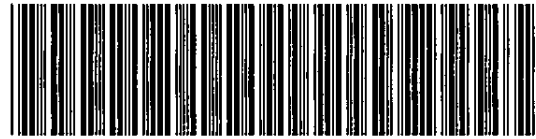
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Erin James International Investments, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P04000 116900

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 R. LaVigne  
Name of Contact Person

Erin James International Investments, INC.  
Firm/Company

17727 E. Lake Jean Road  
Address

Mt. Dora, Florida 32757  
City/State and Zip Code

JAMES R. LAVIGNE @ AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES R. LAVIGNE at (407) 316-9988  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 15, 2012

JAMES R. LAVIGNE  
ERIN JAMES INTERNATIONAL INVESTMENTS INC  
17727 E. LAKE JEM ROAD  
MT. DORA, FL 32757

SUBJECT: ERIN JAMES INTERNATIONAL INVESTMENTS, INC.  
Ref. Number: P04000116900

We have received your document for ERIN JAMES INTERNATIONAL INVESTMENTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your document was incomplete, please complete and return for processing.

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.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 312A00016744

6-29-2012

Please see enclosed.  
James R. Lavigne

RECEIVED  
DIVISION OF CORPORATIONS  
JUL 2 2012

2012 JUL -2 AM 9:36

TO: DIRECTOR OF  
SECURITIES OF FLORIDA

**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: Erin James International Investments, Inc.  
2. The principal office address: 17727 E. Lake Jean Road  
Mt. Dora, Florida 32757  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 08-10-2004 Document number: PD4000116900

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)

James Lavigne  
7087 Grand national Dr. Suite 100  
Orlando, FL 32819

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

James Lavigne  
1000 Legion Place, Suite 1200  
Orlando, Fla 32801

P.O. Box NOT acceptable

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SECRETARY OF STATE

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]  
Signature of an officer or director

JAMES R. LAVIGNE, PRES.  
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)