## P05000057097

(Requestor's Name)	_
813 Deltona Boulevard, Suite A	_
	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	-
	•
(Document Number)	-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	1
·	
÷	
·	
Office Use Only	Į



400162204814

11/04/09--01007--004 \*\*35.00

APPROVED
AND
FILED

O9 NOV -4 PH 3: 10
SECRETARY OF STATE



## 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: M & J MAINTENANCE & REMODELING INC.
- 2. The principal office address: 2315 COGAN DR. PALM BAY FL 32909 US
- 3. The mailing address (if different): 2315 COGAN DR. PALM BAY FL 32909 US
- 4. Date of incorporation/qualification: 04/19/2005 Document number: P05000057097
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ARENCIBIA, JAIME 2315 COGAN DR. PALM BAY FL 32909 US

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

## ALL FLORIDA FIRM INC 813 DELTONA BLVD STE A DELTONA, FL 32725

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 office of director) TRIME ARENCIPIA PRECIDENT (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)

October 23, 2009

(Date)

If signing on behalf of an entity

Devin Newman

(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

1195586