## 10500110245

(Re	questor's Name)	-
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(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Certified Copies Certificates of Status		
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Jeff Moore Construction, Inc. (Name of Corporation)
DOCUMENT NUMBER: POS 000 110245
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:
Name of Contact Person)
Jeff Moore Construction, Inc.
6007 Cakview Or. (Address)
Lakeland FL 33811 (City/State and Zip Code)
For further information concerning this matter, please call:
Nimberly A More at (863) 144-4740  (Name of Contact Person) at (863) 144-4740  (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

rursuant 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: Jeff Moore Const (uction, Inc.
2. The principal office address: 6007 CAKVICH Dr.
Lakeland, Fz 33811
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/9/2005 Document number: P0500110245
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Kimbern A. Moore For a
118 Kinstle Hill Or.
Auburndale FL 33823
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
himberly A. More
(P.O. Box NOT accordable)
Lakeland, FZ 33811
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.
Sympholy A More Vice President  Kimberly A. More Vice President  (Signature of an officer or director)
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.
Lin best Aybord 1/7/06 (Signature of Registered Agent) 1/7/06
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 (8/05)