P060000039a9

(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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COVER LETTER

TO:	Amendment Section Division of Corporations							
SUBJECT:		TJM Promotions, Inc. Name of Corporation						
DOCU	JMENT NUMBER:	P0600	0003929					
The er	closed Statement of Change	e of Registered Office/A	gent and fee are submit	ted for filing.				
Please	return all correspondence c	oncerning this matter to	the following:					
		Trudi Mo	ore					
		Name of Contact	et Person	· ·				
	<u></u>	TJM Promotio						
	Firm/Company							
	511 NW 48th Terrace							
	 	Addres						
Ocala El 34482								
Ocala, FL 34482 City/State and Zip Code								
	trudi@tjmpromotions.com							
	E-mail address: (to be used for future annual report notification)							
For fu	rther information concerning	g this matter, please call	:					
	Trudi Moor	e .	at (352	291-5334				
	Name of Contact P	erson	Area Code & Daytin	291-5334 me Telephone Number				
Enclos	sed is a \$35.00 check made p	payable to the Departme	nt of State.					
	Division P.O. Box	ent Section of Corporations	Street Address: Amendment Se Division of Co Clifton Buildir 2661 Executive Tallahassee, Fl	rporations ng e Center Circle				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a co	rporation organized	507.1508, or 617.1508, Flo I under the laws of the Sta I agent, or both, in the Stat	te of Florida
	the corporation: TJM F			
2. The principal	office address: 371 14V	v 40th remade,	Ocaia, 1 L 34402	
3. The mailing	address (if different):			
4. Date of incor	poration/qualification:	01/10/2006	Document number:	P06000003929
	d street address of the cur rtment of State: (If resign		t and registered office on f	ile with the
	Trudi Moore	 -		
	6041 SW 54th Stre	et, Suite 200		
	Ocala, FL 34474			
6. The name an (if changed):	d street address of the nev	w registered agent (i	f changed) and /or register	red office PEC
	Trudi Moore			SEE
	511 NW 48th Terra			
	Ocala, FL 34482	P.O. Box NOT acc	ceptable	
The street addr as changed wil	ess of its registered offic I be identical.	e and the street add	lress of the business offic	e of its registered agent,
Such change wauthorized by t	as authorized by resolut he board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors or ed in writing of the chang	by an officer so ge.
Signati	ow Mary are of an officer or director	· .	Trudi Mod	ore, VP
I hereby accept I further agree of my duties, and document is be corporation ha	t the appointment as reg to comply with the prov nd I am familiar with an ing filed merely to reflec s been notified in writing	istered agent and a isions of all statute, d accept the obliga et a change in the re g of this change.	gree to act in this capacit s relative to the proper ar tion of my position as reg egistered office address, l	ty. id complete performance ristered agent. Or, if this I hereby confirm that the
	id Mor	<u> </u>	11/28/2	2011
If signing on bo	ehalf of an entity:		Date	
	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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