### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000253424 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : RITTER, RITTER & ZARETSKY

Account Number : I20010000015 Phone : (305)372-0933

Fax Number : (305)372-0836

## REGISTERED AGENT CHANGE

#### JIMMY JAMEZ RECORDS INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help.

https://efile.sunbiz.org/scripts/efilcovr.exe

11/10/2008

No.4839 P. 3

#### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Jimmy Jamez Records INC. (Name of Corporation)
DOCUMENT NUMBER: P 06 000 74204
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)
(Firm/Company)
355NE15 5+ + 100 (Address)
MAN(F() 3737 (City/State and Zip Code)
For further information concerning this matter, please call:
To ha RHAT at (305) 372-0933  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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

CR2E045 (8/05)

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Nov.14. 2008 10:58AM Home Abstract & Title Co. - 001/001 Plori No.4839 P. 15tate

4 pages



November 13, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

JIMMY JAMEZ RECORDS INC 555 NE 15TH STREET SUITE 100 MIAMI, FL 33132

SUBJECT: JIMMY JAMEZ RECORDS INC

REF: P06000074204

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: H08000253424 Letter Number: 708A00057134

SECRETARY OF STATE AND SHOPE OF SECRETARY OF STATE AND SHOPE AND S

P.O BOX 6327 - Tallahassee, Florida 32314

# 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.
1. The name of the corporation: Jimmy James Rocords INC
2. The principal office address: 4734 NE 12 AVC  Miami, FL 33137
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 5/36/06 Document number: P 0600074304
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)
John Ritter
555 NE 15th Street, #100
Miami, FL 33132
6. The name and street address of the new registered agent (if changed) and /or registered office  Sindy Espitia  4724 NE IST Ave  (P.O. Box NOT acceptable)  Miami, FL 33137
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.  Singular or product or precedents anything.
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.
Timely Tales Records Inc.
(Typed of Printed Name)  * * * FILING FEE: \$35,00 * * *

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

H 080002534243