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(Requestor's Name) (Address) (Address)	300182305703
(City/State/Zip/Phone #)	07/06/10-01034-021 **35.00
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COVER LETTER

TO: Amendment Section Division of Corporations

JMLG Corporation

Name of Corporation

DOCUMENT NUMBER:_

SUBJECT

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:

Clifford B. Hark

Name of Contact Person

Hark Burkhalter Yon, PL

Firm/Company

3301 N.W. Boca Raton Blvd., Suite 200

Address

Boca Raton, Florida 33431 City/State and Zip Code

saritaschapiro@yahoo.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Clifford B. Hark
 at (561)
 955-0093

 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)

STATEMENT OF	F CHANGE OI	F REGISTERED OFFICE OF	R REGISTERED	AGENT OR BOTH
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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: JMLG CORPORATION

2. The principal office address: 7200 W. Camino Real, Suite 104, Boca Raton, Florida 33433

3. The mailing address (if different):

9/19/06 P06000120389 4. Date of incorporation/qualification: Document number:

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)

Jerome R. Weinstein

7200 W. Camino Real, Suite 104

Boca Raton, Florida 33433

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

Sarita Schapiro

7200 W. Camino Real, Suite 104 P.O. Box NOT acceptable

Boca Raton, Florida 33433

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

ange was authorized by resolution duly adopted by its board of directors or by an officer so authorized

arita Schapiro, President

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to domply with the provisions of all statutes relative to the proper and complete performance of my duties, and 1 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.

If signing on behalf of an entity:

CR2E045 (8/05)

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Typed or Printed Name

LING FEE: \$35.00

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314