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(Re	equestor's Name)	- 100
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: SEJ Capital INC, (Name of Cornoration)
DOCUMENT NUMBER: P0600 121307
DOCUMENT NUMBER: 106000 (At 30)
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:
Scott Toves (Name of Contact Person)
(Name of Contact Person)
SEJ Capital, Inc. (Firm/Company) 6767 Collins Ave #1109
6767 (olling Ave #1109
Demaddressi Miami Beach FL. 33141 (Address)
(Address)
1508 Bay Rd. #1019
Address: Miani Brach FL 33139 (City/State and Zip Code)
(Digital and Eq. (Digital)
For further information concerning this matter, please call:
(Name of Contact Person) at (786) 222-7746 (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 Street Address: Amendment Section Division of Corporations Division of Corporations Clifton Building
1.0. Dox 0527 Chitch Danding

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 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: SEJ Capital, Inc.
2. The principal office address: 1680 Michigan Ave #700
Miani Bearly FL 33139
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 9/20/06 Document number: P06000 12130
The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Scott E. Jones
1508 Bay Rd. #1019 2 3
Miani Beach FL 33139
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Scott E. Jones
6767 Colline Ave #1109 (P.O. Box NOT acceptable)
Miani Beach, FL 33141
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 officer or director) Scott E. Joves (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.
Scott E. Joves (Signature of Registered Agent) Scott E. Joves
·
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
45 (8/05)