

PO60000129224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

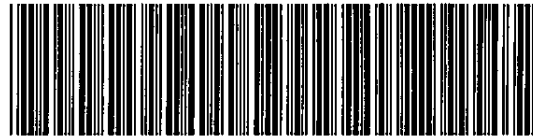
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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FA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Jaime Polania Trucking lines Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000129224.

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:

Jaime Polania
(Name of Contact Person)
Jaime Polania Trucking lines.
(Firm/Company)
12724 Black Angus Dr.
(Address)
Jacksonville, FL 32226
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaime Polania at (904) 714 3927.
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2007

JAIME POLANIA
12724 BLACK ANGUS DRIVE
JACKSONVILLE, FL 32226

SUBJECT: JAIME POLANIA TRUCKING LINES INC
Ref. Number: P06000129224

We have received your document for JAIME POLANIA TRUCKING LINES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 007A00050174



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2007

JAIME POLANIA
JAIME POLANIA TRUCKING LINES INC.
12724 BLACK ANGUS DRIVE
JACKSONVILLE, FL 32226

SUBJECT: JAIME POLANIA TRUCKING LINES INC
Ref. Number: P06000129224

We have received your document for JAIME POLANIA TRUCKING LINES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 407A00047209

Still need correction

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DIVISION OF CORPORATIONS

TALLAHASSEE, FLORIDA

2007 DEC 14 AM 8:00

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**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Jaime Polania trucking lines INC
2. The principal office address: 12724 Black Angus Dr.
Jacksonville, FL 32226
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/10/2006 Document number: PO6000129224
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

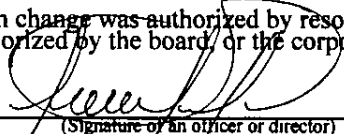
Jaime H. Polania
12724 Black Angus Dr.
Jacksonville, FL 32226

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

Jaime Polania
12261 Heartleaf Ct.
(P.O. Box NOT acceptable)
Jacksonville, FL 32225

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)

Jaime Polania
(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.


(Signature of Registered Agent)

08-13-07
(Date)

If signing on behalf of an entity:

Jaime Polania
(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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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