P06000142079

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SECRETARISEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: EJ PROPERTY HOLDINGS OF FLORIDA, INC. Name of Corporation						
DOCUMENT NUMBER: P06000142079						
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:						
. read retain an correspondence concerning and matter to the following.						
DEBORAH TRACY						
Name of Contact Person						
LAW OFFICES OF DEBORAH ROSE TRACY PA						
Firm/Company						
POST OFFICE BOX 101						
Address						
VALRICO, FL 33595-0101 City/State and Zip Code						
City/state and Zip Code						
DEBORAH@DTRACYLAW.COM						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
DEBORAH TRACY at (813) 765-8344						
DEBORAH TRACY at (813) 765-8344 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle						

Tallahassee, FL 32301

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

statement of cha	nge is submitted for a cor	poration organize	607.1508, or 617.1508, Flo ed under the laws of the Stat ed agent, or both, in the Stat	te of FLORIDA		
1. The name of t	the corporation: EJ PRO	OPERTY HO	DLDINGS OF FLOI	RIDA, INC.		
2. The principal	office address: 401 N P	ARSONS AVE	E, BRANDON, FL 335	510		
3. The mailing a	ddress (if different):_POS	ST OFFICE B	OX 2485, VALRICO, F	FL 33595		
4. Date of incorp	poration/qualification:	11/13/06	Document number:	P06000142079		
	I street address of the curre trnent of State: (If resigne		nt and registered office on f	ile with the		
	ELLIE LAMBERT			- 50 5 M		
	401 N PARSONS A	VE				
	BRANDON, FL 335	510		THE SE		
6. The name and (if changed):	d street address of the new	registered agent ((if changed) and /or register	ed office		
	JON L CHIASSON					
	3125 BLACKWATER OAKS WAY					
	P.O. Box NOT acceptable MULBERRY, FL 33860					
The street addre	ess of its registered office	-	Idress of the business offic	e of its registered agent,		
\mathcal{L}_{α}		on duly adopted hon has been notin	by its board of directors or fied in writing of the change	by an officer so		
		tered agent and ions of all statut accept the oblig a change in the of this change.	agree to act in this capacit es relative to the proper an ation of my position as reg registered office address, I	y. Id complete performance istered agent. Or, if this hereby confirm that the		
-Tu-0	10		10/7/10			
J	nature of Registered Agent		• / Date			
Т	yped or Printed Name					

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