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SECRETARY OF STATE

T. Roberts MAY 1772001

## COVER LETTER

TO: Amendment Section Division of Corporations		
SVD vs or JUDNI INC		
SUBJECT: JUDNI, INC.  (Name of Corporat	ion)	
DOCUMENT NUMBER: P06000148953		
The enclosed Statement of Change of Registered Office/Agent	t and fee are submitted for filing	
Please return all correspondence concerning this matter to the	<b>U</b>	
•	v	
PAMELA T. KARLSON		
(Name of Contact Pe	erson)	
PAMELAT KARISON PA		
PAMELA T. KARLSON, P.A. (Firm/Company)		
301 DAL HALL BOULEVARD (Address)		
(1111-111)		
LAKE PLACID, FL 33852		
(City/State and Zip C	Code)	
For further information concerning this matter, please call:		
PAMELA T. KARLSON  (Name of Contact Person)  at (	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.		
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
rananassot, PL 32314	Tallahassee, FL 32301	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: JUDNI, INC
2. The principal	office address: 3031 MORNING GLORY DRIVE, LAKE PLACID, FL 33852
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 12/04/2006 Document number: P06000148953
	d street address of the current registered agent and registered office on file with the rtment of State:
	JUDITH COLLIER
	3031 MORNING GLORY DRIVE
	LAKE PLACID, FL 33852
6. The name and (if changed):	AMELAT KARLSON PA
	PAMELA T. KARLSON, P.A.
	301 DAL HALL BOULEVARD
	(P.O. Box NOT acceptable)
	LAKE PLACID, FL 33852
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
	JUDITH COLLIER  (Printed or typed name and title)
•	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
- Famel	2 Harbon 4.20.07
ν	gnature of Registered Agent) (Date)
	half of an entity:
PAMELA T.	Viped or Printed Name)

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

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