P07000052268

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SECRETARY OF STATE

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COVER LETTER

TO:	Amendment S Division of C			
SUBJI	ECT: Jennife	er Ramirez Enterprises, Inc (Name of C	c. orporation)	
DOCU	JMENT NUM	BER: P07000052268		
The en	closed Stateme	nt of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please	return all corre	spondence concerning this matter	to the following:	
		Jennifer Ra		
		(Name of Con	ntact Person)	
		Jennifer Ramirez Enterpris		
		(Firm/Co	empany)	
6663 La Mirada Drive West #2				
		(Add	ress)	
		Jacksonville, FL 32217		
		(City/State ar	nd Zip Code)	
For fur	ther information	n concerning this matter, please of	all:	
Jen	nifer Ramirez	- FC	at (904) 755-1694 (Area Code & Daytime Telephone Number)	
	(Name	of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclos	ed is a \$35.00 o	check made payable to the Depart	ment of State.	
		Mailing Address: Amendment Section	Street Address: Amendment Section	
		Division of Corporations	Division of Corporations	
		P.O. Box 6327	Clifton Building	
		Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

, TO:

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, inge is submitted for a corporation organized under the laws of the State of Florida was a law as its variety and office an argistanced against on both in the State of Florida.	this	_	
	the corporation: Jennifer Ramirez Enterprises, Inc			
2. The principal	office address: 6663 La Mirada Drive West #2 Jacksonville, FL 32217			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 5/01/2007 Document number: P07000052268			
	I street address of the current registered agent and registered office on file with the trnent of State:			
	Jennifer Ramirez			
	13426 Long Cypress Trail			
	Jacksonville, FL 32223	TAL	07	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	CRETARY LAHASSEI	JUL -2	-1
	Jennifer Ramirez	7.03 10.4		
	6663 La Mirada Drive West #2	S FATI FLORIT	۴ :6	
	(P.O. Box NOT acceptable) Jacksonville, FL 32217	IDA IDA	Š	
The street addre	ess of its registered office and the street address of the business office of its register	ered age	nt,	
J	as authorized by resolution duly adopted by its board of directors or by an officer ne board, or the corporation has been notified in writing of the change.	so		
(Signati	Jennifer Ramirez, President (Printed or typed name and title)		_	
- -	the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete paid I am familiar with and accept the obligation of my position as registered agenting filed merely to reflect a change in the registered office address, I hereby confished in writing of this change.	erforma Or, if t rm that i	nce his the	
· · · · · · · · · · · · · · · · · · ·	AC/ 6/25/07		_	
(half of an entity:			
	Typed or Printed Name)			

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