## P08000065449

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200238187582

08/07/12--01013--006 \*\*35.00



W G.

AUG 1 3 2012 C. MUSTAIN

## COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Jasper Group International, Inc.

Name of Corporation

DOCUMENT NUMBER:

P08000065449

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:

William J. McFarlane

Name of Contact Person

McFarlane & Dolan

Firm/Company

210 North University Drive, #600

Address

്യം «Coral Springs, FL 33071

City/State and Zip Code

sbryan@mcfarlanedolanlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Bryan

.954

340-0005

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

## OM : The Jasper Group

## 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Jasper Group International, Inc.
2. The principal office address: 3606 South Ocean Blvd. Suite 303
Highland Beach, FL 33487
3. The mailing address (if different):
4. Date of incorporation/qualification: 7-9-2008 Document number: P08000065449
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
William J. McFarlane Esq.
10394 W. Sample Rd. #201
Coral Springs, FL 33065
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
William J. McFarlane Esq.
201 N. University Drive Sixth Floor
P.O. Dox NOT acceptable
Coral Springs, FL 33071
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.
Nigrature of an officer or director  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.
Signifiure of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *