## PD8000098717

(Re	equestor's Name)	
. (Ad	ldress)	
. (Ad	Idress)	
(Cit	ty/State/Zip/Phone	<del>∍#</del> )
	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
· (Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	·
		,

Office Use Only



500183623895

07/26/10--01010--006 \*\*35.00

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

RARDICHS (10 Noull)

## **COVER LETTER**

Division of Corporations
SUBJECT: JM. Markeling Solutions Inc. Name of Gorporation
DOCUMENT NUMBER: 263656758
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:
Mayra M Vazquez  Name of Contact Person
Mayor Donales
7320 SW 14 Street
Miaui Fl 33144 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  Haya Vazquez  Name of Cohtact Person  Area Code & Daytime Telephone Number  305 - 458 - 7350 (Cull)  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

CR2E045 (8/05)

## FEI Number - 263656758.

## 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 7-19-2010
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: JM Marketing Solutions INC
1. The name of the corporation: JM Marketing Solutions INC  2. The principal office address: $7320 \text{ SW} 14 \text{ ST}$ , MIAMI, FL $33144 \text{ US}$
3. The mailing address (if different): 1953 SW 2 ST APT # 4
MIAMI, FL 33135 US
4. Date of incorporation/qualification: 11-4-2008 Document number: POS 0000 96717
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)
VEGA, JOSE
25 SE 2nd AVE, APT # 410
MIAMI FL 3313) US FOR
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  VAZQUEZ, MAYAA
7320 SW 14 ST P.O. Box NOT acceptable
MIAMI, FL 33144 US
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.
Mayor Japas' Printed of typed name and title VAZQUE
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.  7-19-10  Signature of Registred Agent)  Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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