

P09000038671

(Requestor's Name)

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(City/State/Zip/Phone #)

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S. TALLENT

OCT 17 2016

FILED

16 OCT 14 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R/A-CH



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 6, 2016

NOEMI BETANCOURT
7350 SW 89 ST., APT. 1401
MIAMI, FL 33156

SUBJECT: JMR FLORIDA PROPERTIES, INC.
Ref. Number: P09000038671

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan S Tallent
Regulatory Specialist II

Letter Number: 616A00018755

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16 OCT 14 AM 11:56

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JMR FLORIDA PROPERTIES, INC
Name of Corporation

DOCUMENT NUMBER: P09000038671

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:

NOEMI BETANCOURT
Name of Contact Person

Firm/Company

7350 SW 89 ST., APT. 1401
Address

MIAMI FL 33156
City/State and Zip Code

NBETANCOURT2003@YAHOO.COM ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NOEMI BETANCOURT at (305) 753-4424
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

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: JMR FLORIDA PROPERTIES, INC.
2. The principal office address: 7350 SW 89 ST., APT. 1401
MIAMI FL 33156
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/30/2009 Document number: P09000038671

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)

ESTHER E. ROSADO
1581 BRICKELL AVE APT. 1202
MIAMI FL 33129

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NOEMI BETANCOURT
7350 SW 89 ST., APT. 1401
MIAMI FL 33156

P.O. Box NOT acceptable

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.

[Signature]
Signature of an officer or director

Julia M. Rosado / President
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.

[Signature]
Signature of Registered Agent

8/10/16
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)