(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(0)	10t-t-17:-(Dt	- 40			
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies	Certificate:	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



200163643642

01/13/10--01010--016 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations						
MAY OBUIL HOUSE IND						
SUBJECT: JAX GRILL HOUSE INC Name of Corporation						
Name of Corporation						
DOCUMENT NUMBER: P09000047582						
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:						
Charles C. Moore						
Name of Contact Person						
Grill House Char. Broiled Delivery						
Firm/Company						
3980 SOUTHSIDE BLVD #110						
Address						
lookoonvilla El 20046						
Jacksonville, Fl 32216 City/State and Zip Code						
0. y . 3 m. 2 m						
jaxgrillhouse@yahoo.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Charles C Master 2004 404 5000						
Charles C. Moore at (904) 401-5229 Name of Contact Person Area Code & Daytime Telephone Number						
Than of Condet Follow Thomas Tolephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Street Address: Amendment Section Amendment Section						
Division of Corporations Amendment Section Amendment Section Division of Corporations						
P.O. Box 6327 Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle						

Tallahassee, FL 32301

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

statement of cha	nge is submitted for a cor	poration organizea	07.1508, or 617.1508, Florid I under the laws of the State I agent, or both, in the State o	_{of_} Florida		
	he corporation: JAX G					
2. The principal	office address: 3980 SC	OUTHSIDE BLV	/D #110			
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification:	07/01/2009	_ Document number:	P09000047582		
	I street address of the curr tment of State: (If resigne		t and registered office on file	with the		
	CHEN, JEN MIN re	signed				
	10119 ECTON LN					
	JACKSONVILLE, F	L 32246		TAS		
6. The name and (if changed):	street address of the new	registered agent (if	f changed) and /or registered	ZOIO JAN 13 T SECRETARY I TALLAHASSET		
	CHARLES C. MOO	RE	· · · · · · · · · · · · · · · · · · ·	SSEE S		
	437 GLYNLEA RD			- EE.FLORI		
	P.O. Box NOT acceptable JACKSONVILLE, FL 32216					

The street address changed will	ess of its registered office be identical.	and the street add	lress of the business office of	of its registered agent,		
Such change wa authorized by th	as authorized by resolution ne board, or the corporati	on duly adopted by on has been notifie	its board of directors or by ed in writing of the change.	an officer so		
Man Jak	e of aprotticer of director		LO, MAN YU Printed or typed name a			
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as regis to comply with the provis d I am familiar with and ng filed merely to reflect been notified in writing	stered agent and a sions of all statutes accept the obligat a change in the re of this change.	gree to act in this capacity. Trelative to the proper and tion of my position as regist gistered office address, I h	complete performance ered agent. Or, if this ereby confirm that the		
Cha-	- P Mas-		01/11/20	10		
	nature of Registered Agent		Date			
If signing on be	half of an entity:					
	ARLES C. MOORE yped or Printed Name	**************************************				

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