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| (Requestor's Name) | | | | | | |
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| (Add | (Address) | | | | | |
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| ,;' (Add | (Address) | | | | | |
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| PICK-UP | ☐ WAIT | MAIL | | | | |
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| Certified Copies | Certificates | of Status | | | | |
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| Special Instructions to I | Filing Officer: | i | | | | |
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Office Use Only



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Roberts | JAN | 0.51 2010)

COVER LETTER

| TO: Amendment Section Division of Corpo | | | | | | | | |
|---|---|----------------------------------|---|--|--|--|--|--|
| SUBJECT: JJ OUTDOOR MARKET CO. Name of Corporation | | | | | | | | |
| | Door | • | | | | | | |
| DOCUMENT NUMBER | : | 000059275 | | | | | | |
| The enclosed Statement of | 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: | | | | | | | | |
| | leader II | امالم | | | | | | |
| | Judy H Name of Cor | olland ntact Person | · | | | | | |
| | / valle of ool | | | | | | | |
| JJ OUTDOOR MARET CO. | | | | | | | | |
| | Firm/Co | | | | | | | |
| | | | | | | | | |
| | 1643 Williams | sburg Square | | | | | | |
| | Add | ress | | | | | | |
| | | | | | | | | |
| | Lakeland, | FI 33803 | | | | | | |
| | City/State ar | nd Zip Code | | | | | | |
| • | | | | | | | | |
| | jj@jjoutdoorm | arketco.com | ***** | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | | | | |
| For further information concerning this matter, please call: | | | | | | | | |
| | | | | | | | | |
| | Holland | at (863) | 226-0866 | | | | | |
| Name of C | ontact Person | Area Code & Dayti | me Telephone Number | | | | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | | | | | | |
| <u>M</u> | ailing Address: | Street Address | <u>.</u> | | | | | |
| | mendment Section | Amendment S | • | | | | | |
| | ivision of Corporations O. Box 6327 | Division of Co Clifton Buildi | · | | | | | |
| | allahassee, FL 32314 | | re Center Circle | | | | | |
| • | | Tallahassee F | | | | | | |

TO:

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

| statement of cha | nge is submitted for a corpo | oration organized | 7.1508, or 617.1508, Floria under the laws of the State o agent, or both, in the State o | of Florida |
|-------------------------------------|---|--|--|---|
| | ne corporation: JJ OUT | <u> </u> | | |
| 2. The principal | office address: 1643 Willi | iamsburg Squa | ire | ······································ |
| | Lakeland | , FL 33803 | | |
| 3. The mailing a | ddress (if different): | ······································ | | |
| 4. Date of incorp | oration/qualification: | 07/10/2009 | Document number: | P09000059275 |
| | street address of the current ment of State: (If resigned, | | and registered office on file | with the |
| | BUSINESS FILINGS | INCORPORA | TED | <u> </u> |
| | 1203 GOVERNOR'S | SQUARE BLV | D SUITE 101 | _ FE 90 TI |
| | TALLAHASSEE FL 3 | 2301-2960 | ************************************** | 一號了一 |
| 6. The name and (if changed): | street address of the new re | egistered agent (if | changed) and /or registered | office SEE. Fr |
| | Judy Holland | | | _ = = = = = = = = = = = = = = = = = = = |
| | 1643 Williamsburg So | quare | | |
| | Lateral El 2000 | P.O. Box NOT accept | otable | |
| | Lakeland, FL 33803 | , , | | |
| The street addre as changed will | ss of its registered office a be identical. | nd the street addr | ess of the business office of | of its registered agent, |
| Such change wa authorized by th | s authorized by resolution e board, or the corporation | duly adopted by has been notified | its board of directors or by d in writing of the change. | an officer so |
| Toy H | Many President | <u> </u> | Jody Holland (P | resident) |
| of my duties, an document is bei | the appointment as registe o comply with the provision of I am familiar with and a ng filed merely to reflect a been notified in writing of | ons of all statutes : ccept the obligation change in the reg | ree to act in this capacity. relative to the proper and c on of my position as regist sistered office address, I he | complete performance ered agent. Or, if this ereby confirm that the |
| Judi | Li-Halland lature of Registered Agent | | December 28 | ,2009 |
| If signing on be | half of an entity: | | | |
| T | ped or Printed Name | | | |

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