P090000000354

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
	WAIT	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

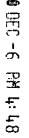
Office Use Only



200188238052

200188238052 12/06/10--01010--018 **35.00







COVER LETTER -

Division of	Corporations	
SUBJECT:	Jaimes Towing & Re	covery, Inc.
	Name of Corp	oration
DOCUMENT NU	MBER: P0900	0060356
The enclosed Stater	nent of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all con	respondence concerning this matter to	the following:
-	BRANDY STEF	
	,	•
	JAIMES TOWING & R	RECOVERY, INC
	Firm/Comp	
	160 HUNTER BL	
	Address	S
	CAPE CORAL,	FL 33909
	City/State and 2	Zip Code
_	JAIMESTOWING@Y	
	E-mail address: (to be used for futu	re annual report notification)
For further informa	tion concerning this matter, please call	;
BRAN	NDY STEPHENSON	at (239) 673-7238
	ne of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.0	0 check made payable to the Departme	ent 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

			607.1508, or 617.1508, Flo ed under the laws of the Sta			
			ed agent, or both, in the Sta		<u> </u>	
	•		& RECOVERY, IN STE A-2 CAPE CORA		9	
3. The mailing	address (if different): SA	ME				
4. Date of incor	poration/qualification:	7/15/2009	Document number:	P09000	060356	
	d street address of the current of State: (If resigne		nt and registered office on t	file with the		
	BRANDY STEPHE	NSON			_	
	7515 ALUMINUM F	ROAD				
	N FT MYERS, FL 3	33903				١-
6. The name an (if changed):	d street address of the nev	v registered agent ((if changed) and /or register	red office	6 PH 4:	
	SAME				6 t	
	160 HUNTER BLV					
	CAPE CORAL, FL	P.O. Box NOT a 33909	cceptable			
The street addr	ess of its registered office l be identical.	e and the street ad	ldress of the business offic	e of its registe	ered agent,	
Such change w authorized by t	as authorized by resoluti he board, or the corporat	on duly adopted b	y its board of directors or lied in writing of the chang	by an officer ge.	so	
101016 Signati	ire of an officer or director	84	BRANDY STE	PHENSON ne and title	<u> </u>	
I further agree of my duties, ar document is be	the appointment as regi to comply with the provi nd I am familiar with and ing filed merely to reflec s been notified in writing	sions of all statute l accept the oblige t a change in the i	agree to act in this capaci es relative to the proper ar ation of my position as reg registered office address, i	ty. id complete p istered agent. I hereby confi	erformance Or, if this rm that the	
Klai	ay the grant of Registered Agent	LSL .	11/30	110		
If signing on be	chalf of an entity:		·			
JAIMES TO	WING & RECOVER	Y INC				

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

Typed or Printed Name