

PO9000064882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

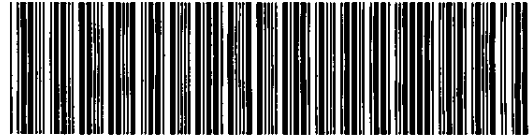
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700254564877

RA
Change

01/06/14--01010--017 **35.00

FILED
2014 JAN -6 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
1/14/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IJ GAS & GRILL Inc
Name of Corporation

DOCUMENT NUMBER: P09000064882

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:

JIGISHA PATEL
Name of Contact Person

Firm/Company

12507 CROWN POINTE CIRCLE
Address

CLERMONT, FL 34711
City/State and Zip Code

mayank@mpatelCompany.Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JIGISHA PATEL at (352) 874-5741
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: JT GAP & GRILL INC
2. The principal office address: 904 SOUTH JEFFERSON STREET
PERRY, FL 32347
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/31/2004 Document number: P09000064882
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)

PATEL RAMDAS S
18913 NEST FERN CIRCLE
TAMPA, FL 33647

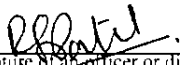
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JIGISHA PATEL
12507 CROWN POINTE CIRCLE
CLERMONT, FL 34711

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 of officer or director

RAMDAS S PATEL
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 of Registered Agent

12/31/13
Date

If signing on behalf of an entity:

Typed or Printed Name

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