

P10000023482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

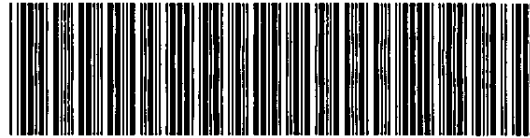
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. Lemieux
NOV 03 2015
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Joseph, Hajsk & Associates, Inc.
Name of Corporation

DOCUMENT NUMBER: P10000023482

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:

Donald Joseph

Name of Contact Person

Joseph, Hajsk & Associates, Inc.

Firm/Company

49 N. Federal Hwy #277

Address

Pompano Beach, FL 33062

City/State and Zip Code

djosephjha@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald Joseph

Name of Contact Person

at (954) 598-5834

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2015

DONALD JOSEPH
49 N FEDERAL HWY #277
POMPANO BEACH, FL 33062

SUBJECT: JOSEPH, HAJSK & ASSOCIATES INC.
Ref. Number: P1000023482

We have received your document for JOSEPH, HAJSK & ASSOCIATES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 515A00021975

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15 OCT 30 PM 4:33

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: Joseph, Hajsk & Associates, Inc.

2. The principal office address: 49 N. Federal Hwy #277 Pompano Beach, FL 33062

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/16/2010 Document number: P10000023482

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)

Business Filings Incorporated

1200 South Pine Island Road

Plantation, FL 33324

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

Donald Joseph

2620 NE 20 Street

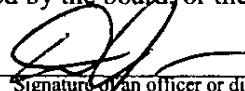
P.O. Box NOT acceptable

Pompano Beach, FL 33062

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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 an officer or director

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 of Registered Agent

10/13/15

Date

If signing on behalf of an entity:

Donald Joseph

Typed or Printed Name

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