P10000 61843

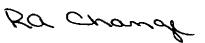
| (Requ | estor's Name) | |
|---|-----------------|-------------|
| (Addr | ess) | |
| (Addr | ess) | |
| (City/S | State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busia | ness Entity Nam | e) |
| (Docu | ment Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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COVER LETTER

| Division of Corporations | |
|--|-------------|
| SUBJECT: JFA ENTERPRISES INC Name of Corporation | |
| DOCUMENT NUMBER: P1 00000 618 4 3 | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fi | ling. |
| Please return all correspondence concerning this matter to the following: | |
| JEAN - FRANCOIS AUBETTE. Name of Contact Person | |
| JFA ENTERPRISES IN C Firm/Company | |
| 6083 TERRA ROSA CIRCLE | |
| BOYNTON BEACH, FL 33472 City/State and Zip Code | <u>.</u> |
| TF@ JFA ENTERPRISES. coM E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| TEAN - FRANCOIS AUNETTE at (561) 306-521 Name of Contact Person Area Code & Daytime Telepl | hone Number |
| Enclosed is a \$35.00 check made payable to the Department of State. | <i>y</i> . |

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

TO:

Amendment Section

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

| statement of change is submitted for a corporation | on organized under the laws of the State of Ticcicla |
|--|---|
| - • | or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: JFA EN | |
| 2. The principal office address: 6083 | |
| £,GYNTO | N SENT, FL 33472 |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: | 28,2016 Document number: _ P10000061343 |
| 5. The name and street address of the current reg Florida Department of State: (If resigned, enter | istered agent and registered office on file with the r resigned) (CLD A DDR(SS) |
| JCAN-FRA | NOGIS AUDETTE |
| 9674 647 | WAY SOUTH |
| BOYNTON A | SEACH , FL 33437 |
| 6. The name and street address of the new registe (if changed): CNEW FADRESS) | |
| JEAN-FA | RANCOIS AUDETTE |
| <u> </u> | RRA ROSA CIRCLE |
| _ | · • |
| | BEN(H, FL 33472 3 |
| The street address of its registered office and the as changed will be identical. | e street address of the business office of its registered agent, |
| Such change was authorized by resolution duly authorized by the board, or the corporation has l | adopted by its board of directors or by an officer so been notified in writing of the change. |
| Signature of an officer or director | Stephanic Audotte Scardary |
| I hereby accept the appointment as registered a I further agree to comply with the provisions of performance of my duties, and I am familiar wit agent. Or, if this document is being filed merely hereby confirm that the corporation has been no | gent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered y to reflect a change in the registered office address. I otified in writing of this change. |
| Signature of Registered Agent | |
| Signature of Registered Agent | Date |
| If signing on behalf of an entity: | |
| Typed or Printed Name | . · _'' |

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