## P11000002072

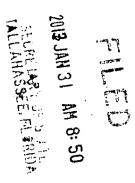
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(City)	/State/Zip/Phone	<b>⇒</b> #)
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T. LEWIS

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: J. Roberts Residential, Inc.		
DOCUMENT NUMBER: P11 00000 2072		
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:		
Jelemy Sposato  Name of Contact Person		
i		
T. Roberts and Company		
8890 Saltose Lave #106		
FORD MYEN FL 33912 City/State and Zip Code		
Jereny, Sposato @ italients.com E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Tereury Sports at 239 349-2317  Name of Contact Person Area Code & Daytime Telephone Number		
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  Street Address: Amendment Section Division of Corporations		

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 647.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Torida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: J. Roberts Residential, Iuc,
2. The principal office address: 2030 Vinginia Ave. #6
Ft. Udyers, FL 33901
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 16201 Document number: fl00000 2072
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)
Chia F. Magda
2030 Virginia Live., #A
H. Myers, FL 33901 PM = 1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Law Office of Thomas M. Tarsia, P. L.
2311 Santa Barbara Blud., #111
Cape Corol, FC 33991
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 Affice Nor director Chia Manda President
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.
1/28/13
Signature of Registered Agent Date
If signing on behalf of an entity:
Thomas M. Tarsia Typed or Printed Name

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