P1/000027355

, (Re	equestor's Name)	
. (Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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(Bu	ısiness Entity Nan	ne)
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AR 12/2/11

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: AED Holding Inc. Name of Corporation
DOCUMENT NUMBER: \$11000027355
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:
A.J. Simont Name of Contact Person
AEJ Holding Inc Film/Company
468 Sparrow Branch CIOL
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A.J. Simonetha at 904, 438.8536 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	he corporation: AEJ Holdings Inc
2. The principal of	office address: 408 Sparrow Branch Circle Lickson ville FL 32259
3. The mailing ac	ddress (if different):
4. Date of incorp	oration/qualification: 3)2011 Document number: P11000027355
	street address of the current registered agent and registered office on file with the transment of State: (If resigned, enter resigned)
	Romy Shaw
	5051 Colcord Avenue.
	Street address of the new registered agent (if changed) and /or registered office T
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	A.J. Simonetta
,	408 Sparrow Branch Circle SE =
	Lacksonville, Cy 30059
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so by an officer so by an officer so or the corporation has been notified in writing of the change.
Signature	elot an officer or director Printed or typed name and title
I hereby accept I I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete performance of a lam familiar with and accept the obligation of my position as registered agent. Or, if this ag filed merely to reflect a change in the registered office address, I hereby confirm that the been natified in writing of this change.
Sign	indure of Registered Agent Date
If signing on beh	
Z.L.A	simonetta
Ty	ped or Printed Name

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