P11000046346

	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL	
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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SECURIARIES OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: J-Ventures, Inc.

Name of Corporation

DOCUMENT NUMBER:

P11000046346

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

J-VENTURES, INC.

Firm/Company

49 N Federal Highway #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

.954 .598-583

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.
1. The name of	the corporation: J-VENTURE	S, INC.
2. The principal	office address: 2620 NE 20	STREET POMPANO BEACH, FL 33062
3. The mailing a	address (if different): 49 N FEDE	ERAL HWY #277 POMPANO BEACH, FL 33062
4. Date of incor	poration/qualification: MAY 13	3, 2011 Document number: P11000046346
	d street address of the current regis	stered agent and registered office on file with the resigned)
	BUSINESS FILINGS IN	NCORPORATED E E
	1203 GOVERNOR'S S	QUARE BLVD SUITE 101
	TALLAHASSEE, FL 32	301-2960
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office
	DONNIE JOSEPH	
	49 N Federal Highway #27	7 Pompano Beach, FL 33062
	P.O. I	Box NOT acceptable
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent,
Such change wa authorized by t	as authorized by resolution duly a be board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
LDf.	Donald Joseph, President	
I hereby accept	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no	Printed or typed name and title gent and agree to act in this capacity. all statutes relative to the proper and complete a and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.
(1)	,	3/31/2016
Sig	nature of Registered Agent	Date
If signing on be	chalf of an entity:	
	O JOSEPIT yped or Printed Name	

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