

P11000089864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

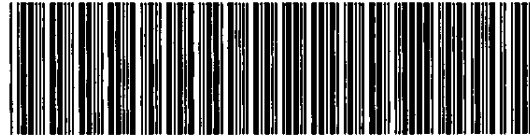
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATION
12 DEC 11 AM 8:51

RA/R0/CH8
@ 12/12/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JCB 74, Inc

Name of Corporation

DOCUMENT NUMBER: P11000089864

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:

Jeff Burch

Name of Contact Person

Firm/Company

11281 SW 56 Ct

Address

Cooper City, FL 33330

City/State and Zip Code

melime1216@gmail.com

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

For further information concerning this matter, please call:

Melissa Burch

Name of Contact Person

at (954) 478-2022

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**

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: JCB74, Inc
2. The principal office address: 11281 SW 56 Ct. Cooper City FL 33330
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/13/11 Document number: P11000089864
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)

Robbin L. Petras

1720 Harrison St. Ste 7A

Hollywood, FL 33020

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

Jeff Burch

11281 SW 56 Ct.

P.O. Box NOT acceptable

Cooper City, FL 33330

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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.

Jeff C. Burch
Signature of an officer or director

Jeffrey C. Burch

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.

Jeff C. Burch
Signature of Registered Agent

12/10/12

Date

If signing on behalf of an entity:

Jeff C. Burch
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)