## P11000094150

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## COVER LETTER

TO: Amendment Section Division of Corporations

James Myers Inc Name of Corporation

P11000094150

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:

James Myers

Name of Contact Person

James Myers Inc

Firm/Company

19931 sw 82nd pl

Address

Cutler Bay, FL 33189

City/State and Zip Code

jamesmyersinc@gmail.com

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

For further information concerning this matter, please call:

James Myers

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 organ	02,607.1508, or $617.1508,$ Florida Statuto nized under the laws of the State of FL ered agent, or both, in the State of Florida		_
1. The name of	the corporation: James Myers Inc	<u> </u>		
2. The principal	office address: 19931 sw 82nd pl y, FL 33189			
3. The mailing a	ddress (if different):			
4. Date of incor	poration/qualification: 10/27/2011	Document number: P11000094	4150	
5. The name and		agent and registered office on file with the ed)		
	CORPORATE CREATIONS	NETWORK, INC		
	11380 PROSPERITY FARM	S ROAD #221E		
	PALM BEACH GARDENS, F	L 33410	2016	); <b>1</b> ;
6. The name and street address of the new registered agent (if changed) and /or registered official (if changed):		nt (if changed) and /or registered office	שני -	EN OF CH
	James Myers		A	
	19931 sw 82nd pl		ထဲ့	A
	Cutler Bay, FL 33189	acceptable	<u>5</u>	Ž
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its regis	stered age	ent,
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been no	by its board of directors or by an officentified in writing of the change.	r so	
James Myers, President  Signature of an officer or director  Printed or typed name and title			_	
<del>-</del>		d agree to act in this capacity.  utes relative to the proper and complete cept the obligation of my position as re ect a change in the registered office adding writing of this change.	gistered ress, I	
	nature of Registered Agent	6/2/16		_
		Date		
It signing on be	half of an entity:			
T	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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