

P12000074585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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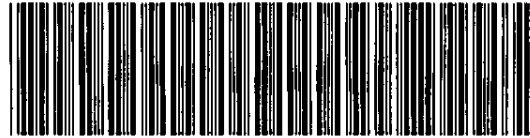
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TO: Amendment Section
Division of Corporations

SUBJECT: JB UNLIMITED TRANSPORT. CORP.
Name of Corporation

DOCUMENT NUMBER: P12000074585

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:

Julio E. Boffill
Name of Contact Person

JB UNLIMITED TRANSPORT. CORP.
Firm/Company

(4715)
4715 Holly Dr.
Address

TAMARAC, FL 33319
City/State and Zip Code

JBUNLIMITEDTRANSPORT@gmail.com.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julio E. Boffill at (954-) 232 2122
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

