

P140000058730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

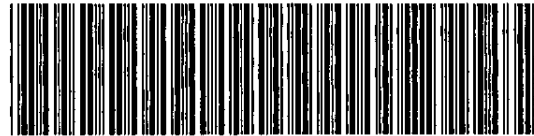
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

RA/change

APR 11 2017

I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** J.B 'S Remodeling services, inc.

Name of Corporation

**DOCUMENT NUMBER:** P14000058730

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:

Ruben Mendoza

Name of Contact Person

J.B'S Remodeling services, inc.

Firm/Company

1540 Illinois Rd

Address

Clearwater, FL 33756

City/State and Zip Code

friaruben@gmail.com

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

For further information concerning this matter, please call:

Ruben Mendoza

Name of Contact Person

at ( 727 ) 776-3565

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED

17 APR 10 PM 3:38

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 29, 2017

RUBEN MENDOZA  
J.B.'S REMODELING SERVICES, INC.  
1540 ILLINOIS RD  
CLEARWATER, FL 33756

SUBJECT: J.B.'S REMODELING SERVICES, INC.  
Ref. Number: P14000058730

We have received your document for J.B.'S REMODELING SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 517A00005979

**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: J.B'S Remodeling services, inc.  
2. The principal office address: 1540 Illinois Rd. Clearwater, FL 33756

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 8/2014 Document number: P14000058730

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)

Ruben Mendoza Yerbafria  
1540 Illinois Rd. Clearwater FL 33756

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

Ruben Mendoza  
1540 Illinois Rd, Clearwater, FL 33756

P.O. Box NOT acceptable

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SECRETARY OF STATE

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.

Ruben Mendoza  
Signature of an officer or director

Ruben Mendoza  
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.*

Ruben Mendoza  
Signature of Registered Agent

4-07-17  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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