PIUDOBBYI

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





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K. V. . . .

COVER LETTER

то:	Amendment Section Division of Corporations					
SUBJ	Jack's InforSec Inc.					
	Name of Corporation					
	P14000093941					
DOC	JMENT NUMBER:					
The ea	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please	return all correspondence concerning this matter to the following:					
	John J. Michalek					
	Name of Contact Person					
	Jack's InforSec Inc.					
Firm/Company						
	1977 Allure Loop					
	Address					
	The Villages, FL 32162					
City/State and Zip Code						
	jackmike632@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For fu	rther information concerning this matter, please call:					
	A. Michalek 352 633-1731					
	Name of Contact Person at () Area Code & Daytime Telephone Num	iber				
Enclos	sed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section Street Address: Amendment Section					
	Division of Corporations Division of Corporations					
	P.O. Box 6327 Clifton Building					
	Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0. unge is submitted for a corporation org er to change its registered office or regi	anized under the laws of the	State of Florida		
	Jack's InforSec Inc	2.	siale of Fioriaa.		
3. The mailing a	address (if different):				
4. Date of incom	November 24	4, 201 Document number:	P14000093941		
	d street address of the current registered rtment of State: (If resigned, enter resigned)		on file with the		
	Cheyenne Moseley, US Corp.	Agents			
13302 Winding Oaks Court, Suite A					
	Tampa, FL 33612				
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) and /or regis	stered office		
	Julie A. Michalek		- · ~ ~		
	1977 Allure Loop				
	P.O. Box No. The Villages, FL 32162	OT acceptable	2:07		
The street addre as changed will	ess of its registered office and the stree be identical.	et address of the business of	fice of its registered agent,		
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been r	ed by its board of directors on tified in writing of the cha	or by an officer so nge.		
1/M	114/1/2 (John J. Michalek, Di	rector		
Signarui	re of an officer or director	Printed or typed n	ame and title		
I fürther agree t performance of agent. Or, if thi	the appointment as registered agent a to comply with the provisions of all sto my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	atutes relative to the proper l accept the obligation of my eflect a change in the registe	and complete position as registered		
Julie	Michalel	February 8, 2017			
Sign	nature of Registered Agent	Date			
	half of an entity:				
Julie A. Micha					
Ty	yped or Printed Name				

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