

P14000095238

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE
J & J MCCARTY SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
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FEB 13 2017
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2/10/2017 9:07:22 AM PST

13239628300 From: Amanda Sando

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **J & J MCCARTY SERVICES, INC.**

Name of Corporation

DOCUMENT NUMBER: **P14000095238**

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:

CHEYENNE MOSELEY

Name of Contact Person

LEGALZOOM.COM, INC.

Firm/Company

101 N BRAND BLVD., 11TH FLOOR

Address

GLENDALE, CA 91203

City/State and Zip Code

MMCCARTY96@GMAIL.COM

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

For further information concerning this matter, please call:

Cheyenne Moseley

Name of Contact Person

at **800 773-0888 ext 9724**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

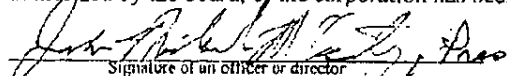
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: J & J MCCARTY SERVICES, INC.
2. The principal office address: 12627 MILWAUKEE AVENUE, TAVARES, FL 32778
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/24/2014 Document number: P14000095238
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)
JOHN MICHAEL MCCARTY
12627 MILWAUKEE AVENUE
TAVARES, FL 32778
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT, SUITE A
P.O. Box NOT acceptable
TAMPA, FL 33612

STATE OF FLORIDA
 DIVISION OF CORPORATIONS
 11 FEB 10 PM 3:49

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.


 Signature of an officer or director
 JOHN MICHAEL MCCARTY, PRESIDENT
 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.


 Signature of Registered Agent
 02/10/2017
 Date

If signing on behalf of an entity:

CHEYENNE MUDLEY, ASSISTANT SECRETARY, ON BEHALF OF UNITED STATES
 CORPORATION AGENTS, INC.
 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)