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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JAR REmodeling, Inc. Name of Corporation
DOCUMENT NUMBER: \$\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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 Randall Name of Contact Person
JAR Remodeling, Inc.
5855 Sandburg DR
N. Ft. Myers FL 33903 City/State and Zip Code
E-mail address: (to be used for flature annual report notification)
For further information concerning this matter, please call:
James Randall at (239) 931-6653 Name of Contact Person Area Code & Daytime Telephone Number
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

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
1. The name of the corporation: JAR Remodeling, Inc.
2. The principal office address: 5855 SANDBUCG DR NFM, FL 33903
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/15/15 Document number: P1500008445
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)
Michael Cosnet
4616 SW 8th Ct
Cape Coral, FI 33914
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
James Randall
5855 Sandburg Dr. P.O. Box NOT acceptable
NFM, FL 33903
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 MICHAEL A COSHER 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 Date
If signing on behalf of an entity:
James & Randall's Patricia & KILLINGSHORTH
Typed or Printed Name *** FILING FEE: \$35.00 *** MY COMMISSION # EE 890171 EXPIRES: July 4, 2017 Bonded Thru Budget Nearry Services

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

10-2017

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