

P16000032959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

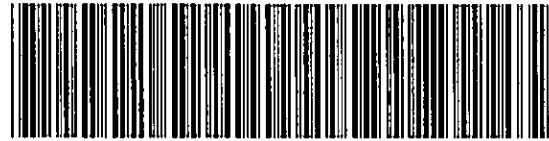
(Business Entity Name)

(Document Number)

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17 AUG 22 PM 2:50
TOLSON

Ra Chang

AUG 30 2017

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CJ Specter Inc.
Name of Corporation

DOCUMENT NUMBER: P16000032959

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:

Registered Agents Inc.
Name of Contact Person

CJ Specter
Firm/Company

3030 N. Rocky Point Dr
Address

STE 150A, TAMPA, FL 33607
City/State and Zip Code

clakath@bellsouth.net
E-mail address: (to be used for future annual report notification)

FILED
STATE OF FLORIDA
DIVISION OF CORPORATIONS
17 AUG 22 PM 2:50

For further information concerning this matter, please call:

CJ Specter at (844) 548-9898
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 4, 2017

REGISTERED AGENTS INC.
CJ SPECTER
3030 N ROCKY POINT DR., STE 150A
TAMPA, FL 33607

SUBJECT: CJ SPECTER, INC.
Ref. Number: P16000032959

We have received your document for CJ SPECTER, 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):

We need the acceptance signature of the new registered agent. It appears that the president of CJ Specter is signing as the agent.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 817A00015839

RECEIVED
17 AUG 22 PM 2:08
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: CJ SPECTER INC.
2. The principal office address: 3030 N. Rocky Point Dr
Ste 150 A, Tampa, FL 33607
3. The mailing address (if different): 3030 N. Rocky Point Dr
Ste 150 A, Tampa, FL 33607
4. Date of incorporation/qualification: 4-11-2014 Document number: P14000032959
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)

Alex A Martinez PA
4010 Laguna St
Coral Gables, FL 33144

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

Registered Agents Inc.

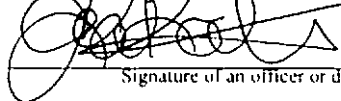
3030 N. Rocky Point Dr. STE 150A

P.O. Box NOT acceptable

Tampa FL 33607

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

Carmen LaKatis

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

8/14/17

Date

If signing on behalf of an entity:

Bill Havre

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)

17 AUG 22 PM 2:50
DIVISION OF CORPORATIONS
STATE OF FLORIDA