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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ACJACJ Enterprises, Inc. Name of Corporation
DOCUMENT NUMBER: P16000037384
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:
Jereny Adams Name of Contact Person
ACJACJ Enterprofes, Inc.
Address Lane
Orlando, FL 32810 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jereny Adams at 407 403-8755 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: Street Address: Amendment Section Amendment Section
Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ACJACJ Enterprise J. Inc.
2. The principal office address: 5834 LUMABY Lane
0/1ando FZ 32810
3. The mailing address (if different): 5834 LUMABY Lane
Mando Tr 32810
4. Date of incorporation/qualification: 4/24/16 Document number: 116000 37384
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)
Adams, Jeromy C
127 W Fairbanks Ave. #199
Winter Park, FL 32789
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Adams, tereny c.
5834 Lulary Lane
Orlando, FL 32910
"dared"
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 Friend 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.
9/19/14
Signature of Registered Agent Date If signing on behalf of an entity:
Typed or Printed Name

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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