P16000040663

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Which I are a go off - ***



Ra Chang

COVER LETTER

TO: Amendment Section Division of Corporation	ns —	
SUBJECT:	JAMAM Past Corc. Name of Corporation	
DOCUMENT NUMBER:	P160000 4063	
The enclosed Statement of Char	age of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence	e concerning this matter to the following:	
	Name of Contact Person	
	Name of Contact Person	
	Firm/Company	
	7871 NW 38 LN ATT 139 Address	
	City/State and Zip Code	4 %
T. mail add	ress: (to be used for future annual report notification)	20 to 10 to
is-man add	ress; (to be used for future annual report notification)	<u>2</u> 9
For further information concern	ing this matter, please call:	0
Tven Some of Contact	at (<u>3C5</u>) 906 - 333 Person Area Code & Daytime Telephone No	umber

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

TO:

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 6. statement of change is submitted for a corporation organized under the lay	es of the State of
in order to change its registered office or registered agent, or hot. 1. The name of the corporation: Same and Best	n, in the State of Florida.
2. The principal office address: 7871 N.W. 38 CM	
Garasville, Fl 3260	
3. The mailing address (if different): $\frac{7671}{6000000000000000000000000000000000000$	<u>4N API 139</u> 37646
4. Date of incorporation/qualification: <u>c 3 /c 3 //6</u> Document of the property of the propert	
5. The name and street address of the current registered agent and registere Florida Department of State: (If resigned, enter resigned)	
Juan Samon	
206 6. Size St Age 30	3 /
Oches, 11 3284	
6. The name and street address of the new registered agent (if changed) and (if changed): TVAN SANCAM 7871 N.W. 38 LN A P.O. Box NOT acceptable	
General 11 326	06
The street address of its registered office and the street address of the buas changed will be identical.	siness office of its registered agent,
Such change was authorized by resolution duly adopted by its board of d authorized by the board, or the corporation has been notified in writing of Signature of an officer or director	rectors or by an officer so f the change.
Signature of an officer or director Printe	d or typed name and title
I hereby accept the appointment as registered agent and agree to act in a literal further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligate agent. Or, if this document is being filed merely to reflect a change in the hereby confirm that the corporation has been notified in writing of this a	this canacity
715 715	Date
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Township Dring of Vinna	
Typed or Printed Name	

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