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R. WHITE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: J&M Brown Trucking, Inc.

Name of Corporation

DOCUMENT NUMBER: P17000020246

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:

Miriam Brown

Name of Contact Person

J&M Brown Trucking, Inc.

Firm/Company

411 Walnut Street #11634

Address

Green Cove Springs, FL 32043

City/State and Zip Code

marathontruckers@gmail.com

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

For further information concerning this matter, please call:

Miriam E. Brown

,,660

287-3827

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. statement of change is submitted for a corporation of	rganized under the laws of the State of Florida
•	gistered agent, or both, in the State of Florida.
1. The name of the corporation: J&M Brown Tru	ucking, Inc.
2. The principal office address: 411 Walnut Str Green Cove Springs, FL 32043	eet #11634
3. The mailing address (if different):	
4. Date of incorporation/qualification: Nov 4, 20	04Document number: P17000020246
5. The name and street address of the current register Florida Department of State: (If resigned, enter res	
Miriam E. Brown	
1805 Landside Drive	
Valrico, FL 33594	
6. The name and street address of the new registered (if changed):	agent (if changed) and /or registered office
Miriam E. Brown	
411 Walnut Street #1163	4
	NOT acceptable
Green Cove Springs, FL	
The street address of its registered office and the str as changed will be identical.	reet address of the business office of its registered agent,
Such change was authorized by resolution duly adorated by the board or the corporation has been	pted by its board of directors or by an officer so i notified in writing of the change.
	Jonathan L. Brown/President
I hereby accept the appointment as registered agent I further agree to comply with the provisions of all sperformance of my duties, and I am familiar with an agent. Or, if this document is being filed merely to thereby confirm that the corporation has been notified.	statutes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address. I
Marin	May 14, 2017
Signature of Registered Agent	Date
If signing on behalf of an entity:	
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)