P17000030298

(Requestor's Name)	
(Address)	000352851540
(Address)	000002001010
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	18/18/2881818829 ** 35.98
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	: :: ::
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ALBRITTON

COVER LETTER

TO:

TO: Amendment Section Division of Corporations	
SUBJECT: JENNIFER ANNE THAYER PA	
Name of Corporation	
DOCUMENT NUMBER: P17000030298	
The enclosed Statement of Change of Register	red Office/Agent and fee are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
JENNIFER THAYER	
Name of Contact Person	
Firm/Company	
100 EST AVE N #203	
Address	
ST PETERSBURG, FL 33701	
City/State and Zip Code	
JENNIFER_THAYER@Y	AHOO.COM
E-mail address: (to be used for future annu	ial report notification)
For further information concerning this matter	; please call:
LISA MACKANESS	at (727) 367-9175 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	ne Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
I. The name of	the corporation: JENNIFER ANNE THAYER PA	
2. The principal office address: 100 IST AVE N #203 ST PETERSBURG, FL 33701		
3. The mailing a	nddress (if different): SAME	
4. Date of incor	poration/qualification: 03/31/2017 Document number: P17000030298	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	JENNIFER A THAYER	
	1001 14TH AVE N	
	ST PETERSBURG, FL 33705	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office JENNIFER A THAYER	
	100 1ST AVE N #203	
	P.O. Box NOT acceptable	
	ST PETERSBURG, FL 33701	
The street addr	ess of its registered office and the street address of the business office of its registered agent. I be identical.	
authorized by	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
\ \ \\	JENNIFER A THAYER, OWNER	
7.1	real and first or director Printed or typed name and first	
I further agi v e of my duties, ac do o ment is be	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ipplied merely to reflect a change in the registered office address, I hereby confirm that the s beyn natified in writing of this change.	
X	09/30/2020	
(3)	Quature of Registered Agent Date	
If signing on b	chalf 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 (04/13)